

AHRQ Training Webinar on the Clinical Decision Support Authoring Tool

Presented by:

Sharon Sebastian, CDS Connect Project Lead, MITRE Chris Moesel, CDS Connect Technical Lead, MITRE

Moderated by:

Edwin Lomotan, MD
Agency for Healthcare Research and Quality

February 7, 2019



Agenda

- Welcome and Introductions
- Presentations
- CDS Authoring Tool Demonstration
- Q&A Session With Presenters

Note: After today's webinar, a copy of the slides will be emailed to all participants.



Presenters and Moderator



Sharon Sebastian RN-BC, MS

- Principal Clinical Informaticist, MITRE
- CDS Connect Project Lead



Chris Moesel

- Principal Software Systems Engineer, MITRE
- CDS Connect Technical Lead
- CDS Authoring Tool Lead



Ed Lomotan, MD

- Medical Officer
- Chief of Clinical Informatics,
 Center for Evidence and
 Practice Improvement, AHRQ



How to Submit a Question

- At any time during the presentation, type your question into the "Q&A" section of your WebEx Q&A panel.
- Please address your questions to "All Panelists" in the dropdown menu.
- Select "Send" to submit your question to the moderator.
- Questions will be read aloud by the moderator.





Learning Objectives

At the conclusion of this activity, participants should be able to:

- 1. Develop logic, including inclusion and exclusion statements, and define the recommended intervention.
- 2. Discuss how to develop "base elements" that can be re-used across logic statements, along with features that enable users to develop subpopulations and how to handle errors.
- 3. Use synthetic test data to verify that authored CDS logic works as expected.
- 4. Save and download their logic expression and provide an understanding of the components of the downloaded zip file.
- 5. Understand how other systems and tools developed by the CDS Connect project (i.e., the Repository and CQL Services) can be used to share and implement the logic developed within the Authoring Tool.

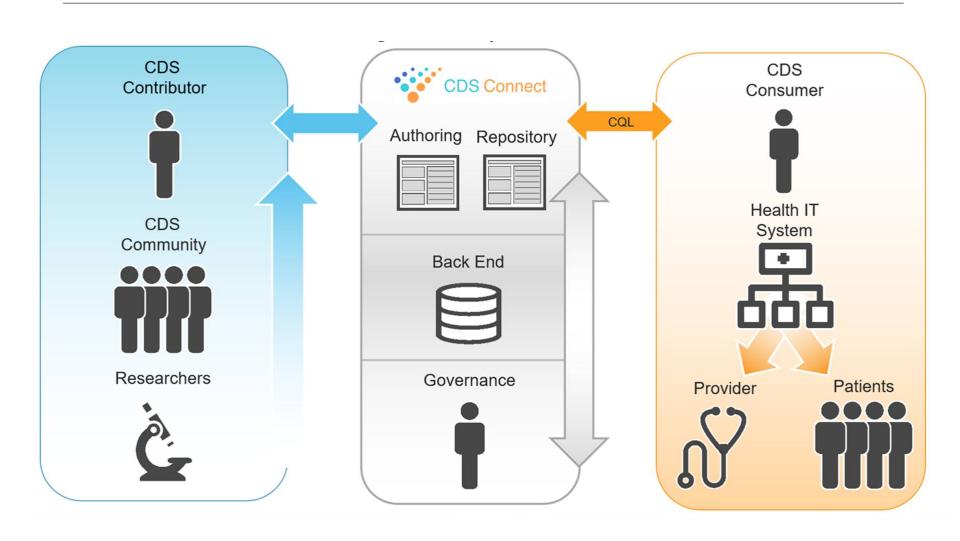


CDS Connect Project Overview and Knowledge Translation Resources

Sharon Sebastian, MITRE



CDS Connect Concept of Operations





CDS Connect Work Streams

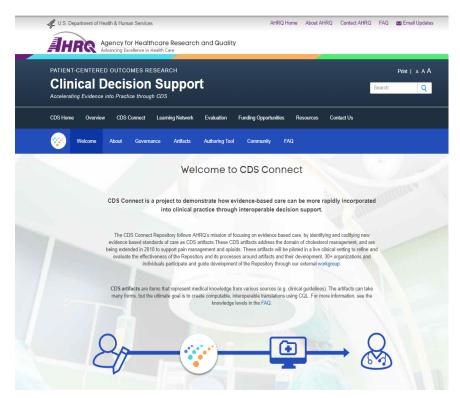
Repository: Design and build an online software "repository" for hosting and sharing new CDS artifacts

Authoring: Build a public-facing, webbased CDS Authoring Tool geared toward non-technical users

Artifacts: Identify and codify new CDS artifacts for care, in specific domains

Pilot: Pilot CDS artifacts in a live, clinical setting

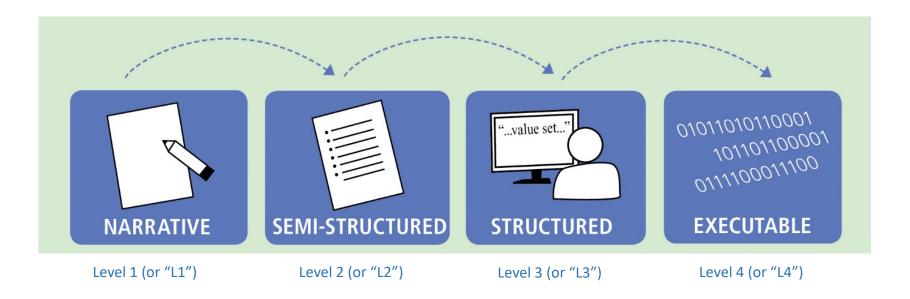
Work Groups: Convene external discussions focused on accelerating evidence into practice through CDS



https://cds.ahrq.gov/cdsconnect



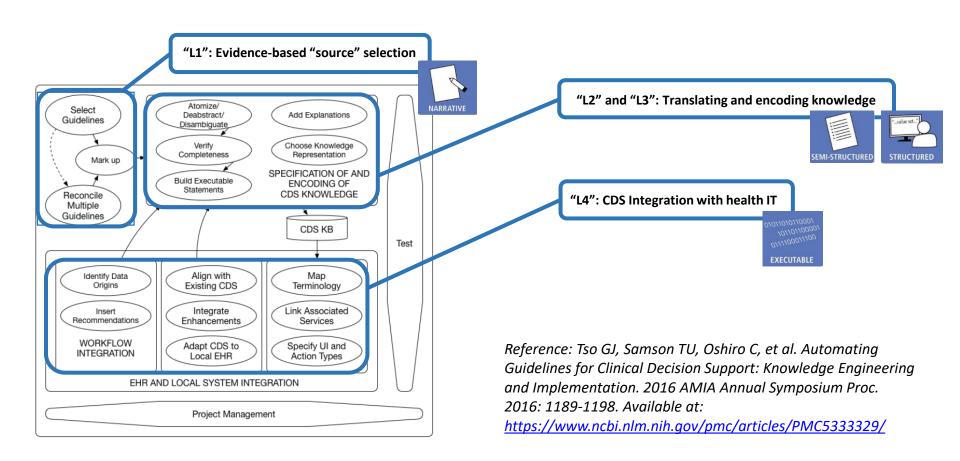
Knowledge Translation into CDS



Adapted from: Boxwala, A. A., et al. (2011). "A multi-layered framework for disseminating knowledge for computer-based decision support." Journal of the American Medical Informatics Association: JAMIA 18 Suppl 1: i132-139.



Knowledge Translation Methodology





CDS Authoring Tool Standards

Chris Moesel, MITRE



CDS Authoring Tool: Health IT Standards

HL7 Clinical Quality Language (CQL)

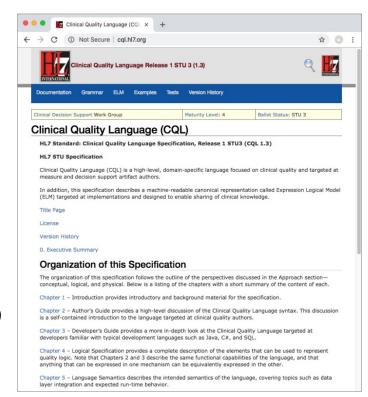
HL7 Fast Healthcare Interoperability Resources (FHIR)



HL7 Clinical Quality Language (CQL)

"Clinical Quality Language (CQL) is a high-level, domain-specific language focused on clinical quality and targeted at measure and decision support artifact authors."

HL7 Standard: Clinical Quality Language Specification, Release 1 STU3 (CQL 1.3) http://cql.hl7.org/





CQL Key Points

- The CQL specification defines two components:
 - Clinical Quality Language: Author-friendly domain-specific language
 - Expression Logical Model: Computable XML or JSON
- CQL leverages best practices and lessons learned from:
 - Quality Data Model: Focus on ease of authoring
 - Health eDecisions: Focus on modularity and computability
 - eCQM & CDS Communities: HL7 Work Groups, S&I Framework
- CQL is designed to work with any data model
- CQL is a HL7 Standard for Trial Use (STU)



CQL Example: Systolic Blood Pressure

```
valueset "Systolic Blood Pressure": '2.16.840.1.113883.3.526.3.1032'
define LastSystolicBPValue:
  Last (
    [Observation: "Systolic Blood Pressure"] O
      where O.status.value = 'final'
      and (
        O.valueQuantity.unit.value in {'mm[Hg]', 'mmHg', 'mm Hg'}
        or O.valueQuantity.code.value = 'mm[Hg]'
      return FHIRHelpers.ToDecimal(0.valueQuantity.value)
      sort by O.effectiveDateTime
```



CQL Example: MeetsInclusionCriteria

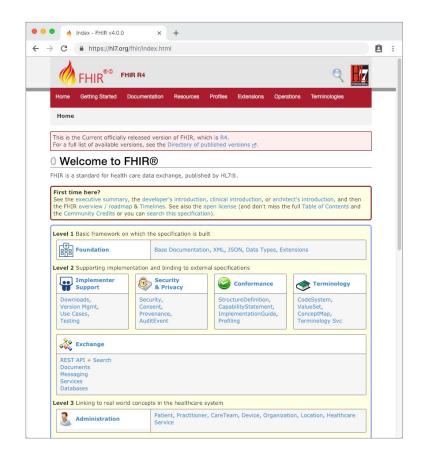
```
define InDemographic:
  AgeInYears() between 40 and 75
define HasCVDRiskFactors:
  MostRecentValidLDLResult > 130 'mg/dL'
  or MostRecentValidHDLResult < 40 'mg/dL'
  or HasDiabetes
  or HasHypertension
  or IsSmoker
define MeetsInclusionCriteria:
  InDemographic
  and HasCVDRiskFactors
  and (
   MostRecentValidCVDRiskAssessmentResult > 10.0 '%'
    or (GradeCRecommendationEnabled and MostRecentValidCVDRiskAssessmentResult >= 7.5 '%')
```



HL7 Fast Healthcare Interoperability Resources (FHIR)

"FHIR is a standard for health care data exchange, published by HL7®."

HL7 FHIR Release 4 (v4.0.0)
http://hl7.org/fhir/R4/index.html



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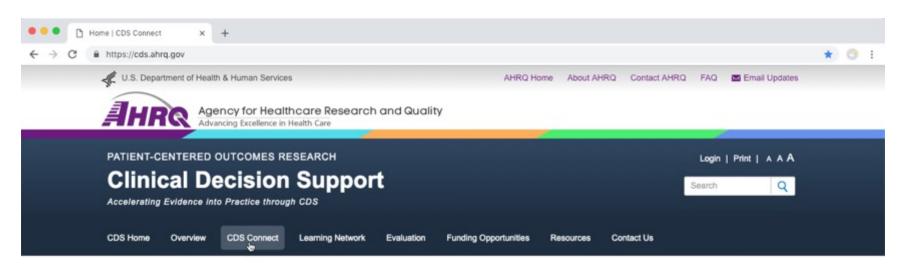
FHIR Examples: Patient and Condition

```
"resourceType": "Patient",
"id": "e7c7c18c 06e1 4426 be5b 494f4573b457",
"name": [
    "given": [
      "Brenda"
    "family": [
      "Jackson"
"gender": "female",
"birthDate": "1956 10 14"
```

```
"resourceType": "Condition",
  "id": "7d0735e7 f062 45af 843c a3e3e7f48888",
  "patient": {
    "reference": "Patient/e7c7c18c 06e1 4426 be5b
494f4573b457"
  },
  "code": {
    "coding": [
        "system": "http://snomed.info/sct",
        "code": "203082005",
        "display": "Fibromyalgia (disorder)"
    "text": "Fibromyalgia (disorder)"
  "clinicalStatus": "active",
  "verificationStatus": "confirmed",
  "onsetDateTime": "2013 04 05T16:00:00.000Z",
  "dateRecorded": "2013 04 05"
```





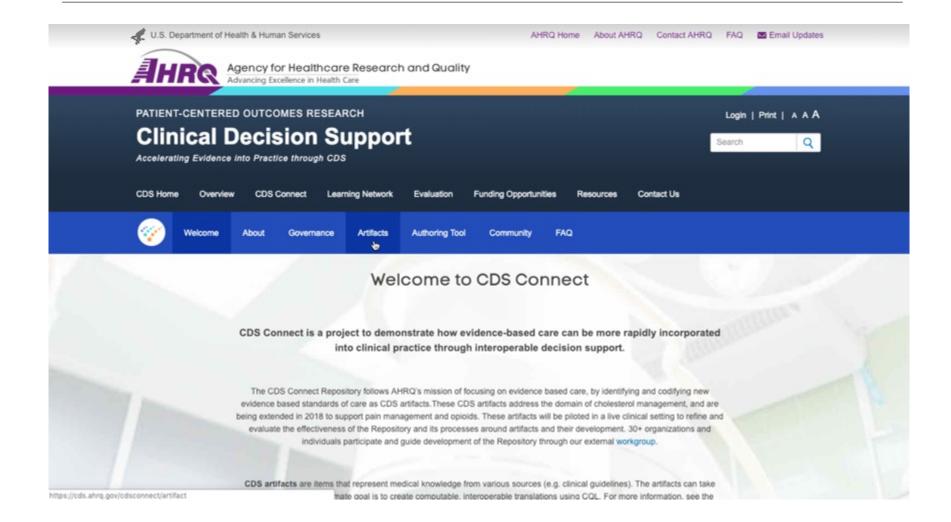


In 2016, AHRQ launched a program of grants and contracts aimed at helping health care providers move patient-centered outcomes research (PCOR) evidence into practice through clinical decision support (CDS). AHRQ advances the science of CDS by supporting implementers, clinicians, and technology vendors in developing CDS tools that are shareable, standards-based, publicly-available, and patient-centered. The four components are detailed below.

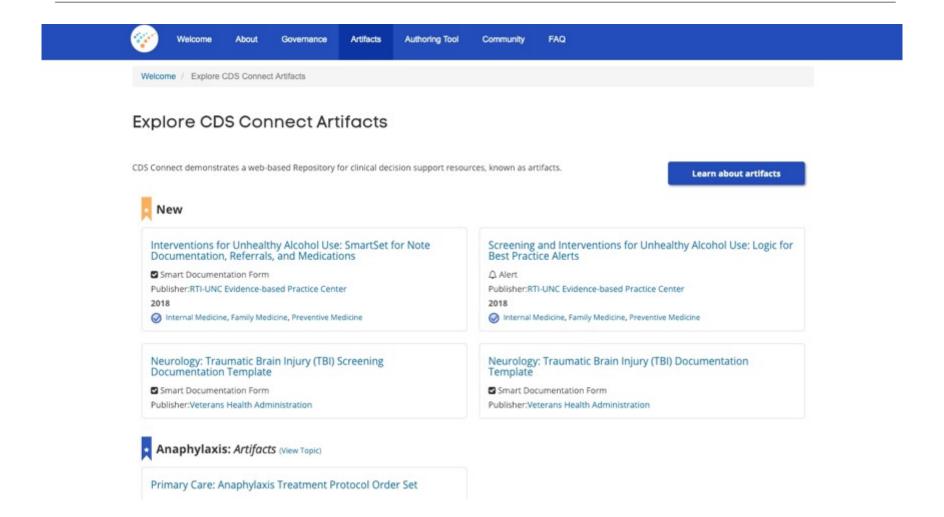




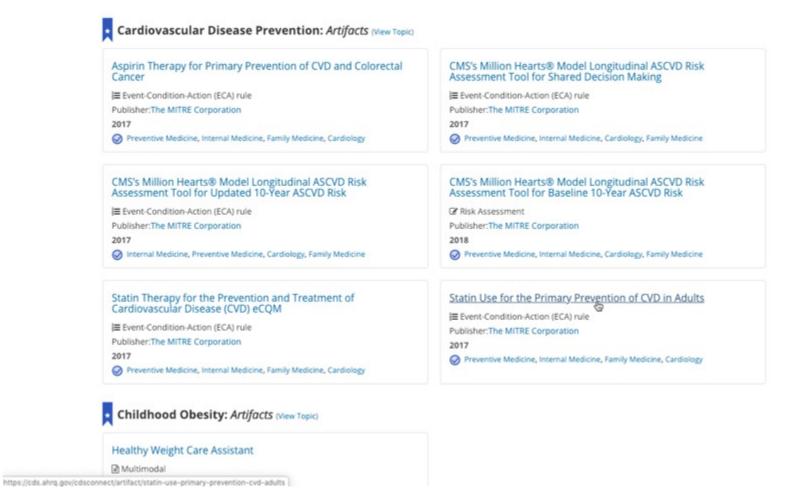














Statin Use for the Primary Prevention of CVD in Adults

Presents a United States Preventive Services Task Force (USPSTF) statin therapy recommendation for adults aged 40 to 75 years without a history of cardiovascular disease PROMINENT REPORTS (CVD) who have 1 or more CVD risk factors (i.e., dyslipidemia, diabetes, hypertension, or smoking) and a calculated 10-year CVD event risk score of 7.5% or greater. Detailed report on the pilot implementation of this artifact (DOC 2.7Mb) Artifact Type Artifact enhancements based on pilot implementation findings (DOC 91Kb) Event-Condition-Action (ECA) rule Creation Date Mon, 07/10/2017 - 12:00 Version Identifier 0.1.1 CDS 009 Status Experimental False Active ARTIFACT CREATION AND USAGE Publisher Steward The MITRE Corporation Agency for Healthcare Research and Quality License AHRQ Government Unlimited Usage Rights IP Attestation @ Yes (Report infringement) Copyrights Recommendation is copyrighted by USPSTF and administered by AHRQ. If you would like further information, would like to give us feedback, or have any questions about this artifact, please contact us at ClinicalDecisionSupport@ahrq.hhs.gov Clinical Domain **⊘** Cardiology Preventive Medicine Internal Medicine Family Medicine



Inclusions

Patient is >=40 and <=75 years of age

AND 1 or more risk factor:

LDL-C lab result > 130 mg/dL (MOST RECENT value within the past 6 years)

OR HDL-C < 40 mg/dL (MOST RECENT value within the past 6 years)

OR Diabetes (Type 1 or Type 2)

OR Hypertension

OR Smoking (MOST RECENT value within the past 6 years)

AND 10-Year CVD risk score >=7.5% (MOST RECENT value within the past 6 years)

Exclusions

Diagnosis of CVD

OR LDL-C lab result >190 mg/dL (MOST RECENT value within the past 6 years)

OR Known Familial Hypercholesterolemia

OR Diagnosis of Active Pregnancy OR Pregnancy Observation in the past 42 weeks

OR Diagnosis: Breastfeeding OR Breastfeeding Observation in the past year

OR Diagnosis of End Stage Renal Disease

OR Actively undergoing dialysis (i.e., within past 7 days)

OR Diagnosis of Active Cirrhosis

OR Already receiving a statin (Medication is Active or has been Ordered)

Interventions and Actions

Intervention DISPLAY notification to provider:



Intervention

DISPLAY notification to provider:

1) If CVD risk score >=7.5% and <10% (Grade C):

Recommendation: Discuss initiation of low to moderate intensity lipid lowering therapy

Rationale: The USPSTF found adequate evidence that use of low- to moderate-dose statins reduces the probability of CVD events and mortality by at least a small amount in adults aged 40 to 75 years who have 1 or more CVD risk factors (dyslipidemia, diabetes, hypertension, or smoking) and a calculated 10-year CVD event risk of 7.5% to 10%.

2) If CVD risk score >=10% (Grade B):

Recommendation: Start low to moderate intensity lipid lowering therapy based on outcome of shared decision making between patient and provider Rationale: The USPSTF found adequate evidence that use of low- to moderate-dose statins reduces the probability of CVD events (MI or ischemic stroke) and mortality by at least a moderate amount in adults aged 40 to 75 years who have 1 or more CVD risk factors (dyslipidemia, diabetes, hypertension, or smoking) and a calculated 10-year CVD event risk of 10% or greater.

3) If Does Not Meet Inclusion Criteria:

Recommendation: No USPSTF recommendation provided, as patient does not meet inclusion criteria

Rationale: The USPSTF guideline applies to adults aged 40 to 75 years who have 1 or more CVD risk factors (dyslipidemia, as evidenced by LDL > 130 mg/dL or HDL < 40 mg/dL, diabetes, hypertension, or smoking) and a calculated 10-year CVD event risk >= 7.5% (grade C) or >= 10% (grade B)

4) Is Excluded:

Recommendation: No USPSTF recommendation provided, as patient meets exclusion criteria

Rationale: This USPSTF guideline should not be used for patients with any of the following: LDL > 190 mg/dL, a previous CVD diagnosis or procedure, familial hypercholesterolemia, end stage renal disease, cirrhosis, recent dialysis, or patients who are pregnant, breastfeeding, or currently on a statin.

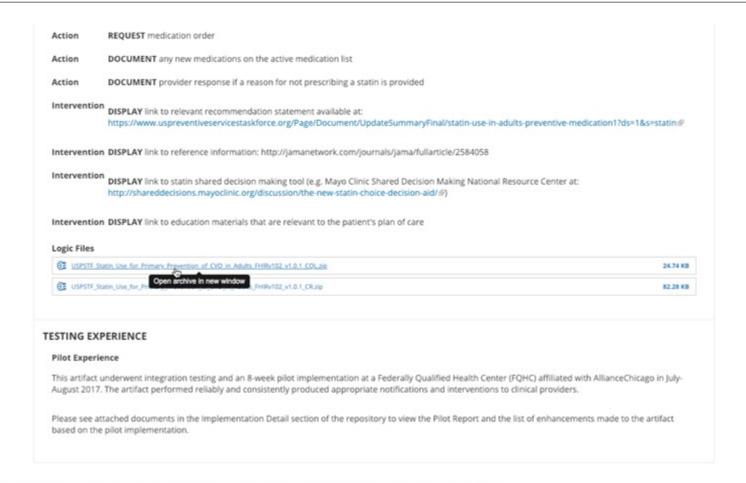
5) Error Message When Missing Data But CDS Can Still Be Processed Enough To Get An Answer

WARNING: Adequate data to process CDS, but one of the following items is missing or more than 6 years old: LDL, HDL, smoking status, or CVD risk score.

6) Error Message When Missing Data Prevents CDS From Being Processed

ERROR: Inadequate data to process CDS, as one of the following items is missing or more than 6 years old: LDL, HDL, smoking status, or CVD risk score.

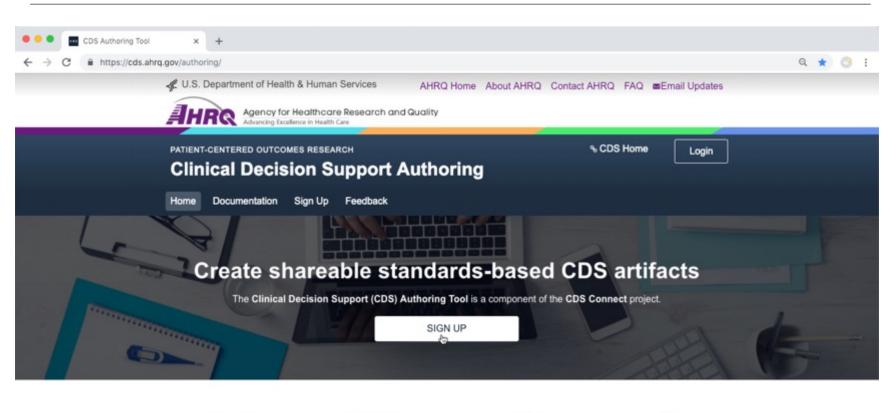




https://cds.ahrq.gov/sites/default/files/cds/artifact/logic/2018-12/USPSTF_Statin_Use_for_Primary_Prevention_of_CVD_in_Adults_FHIRv102_v1.0.1_CQL.zip















Transform

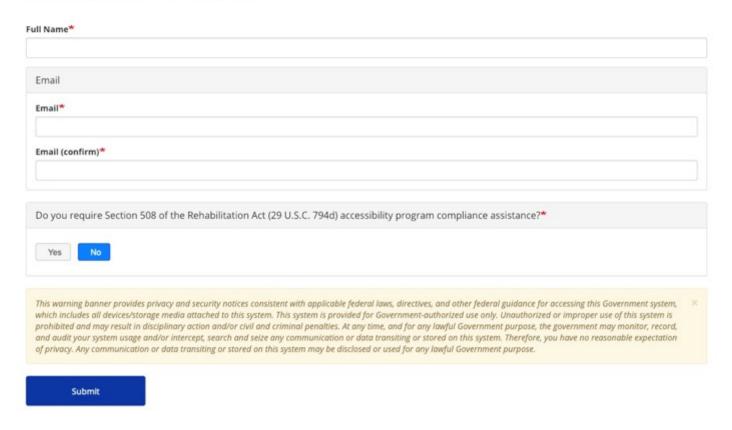
Create

Share

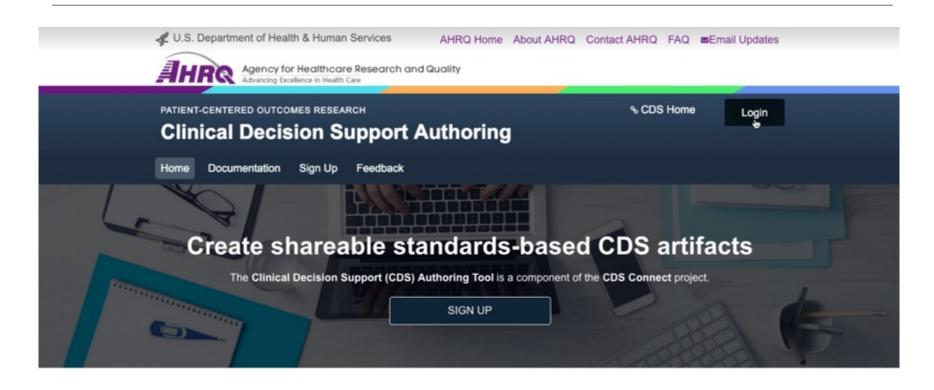
Contribute



CDS Authoring Tool Sign-Up













Create

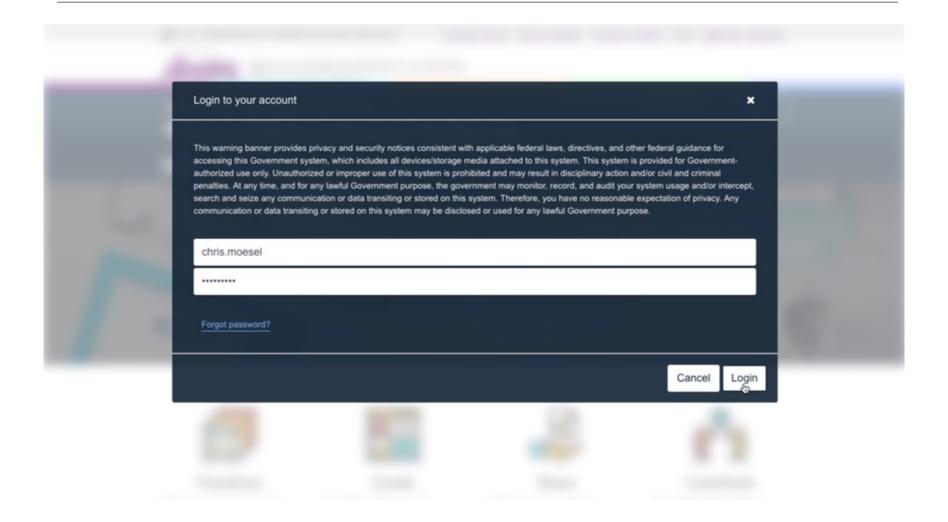


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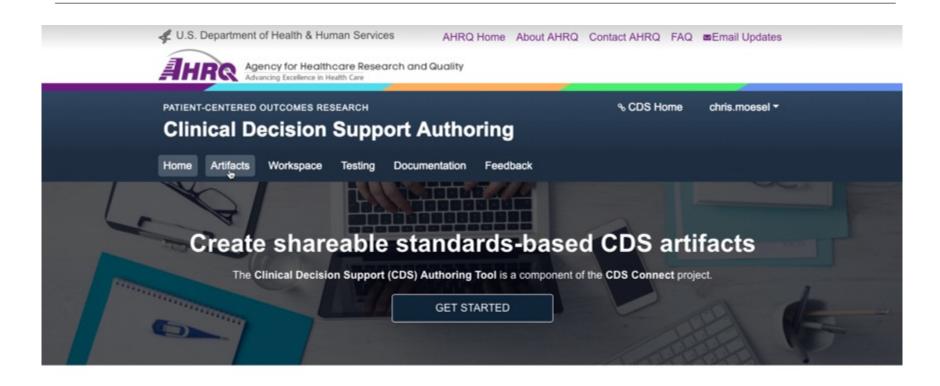


Contribute











Transform



Create



Share

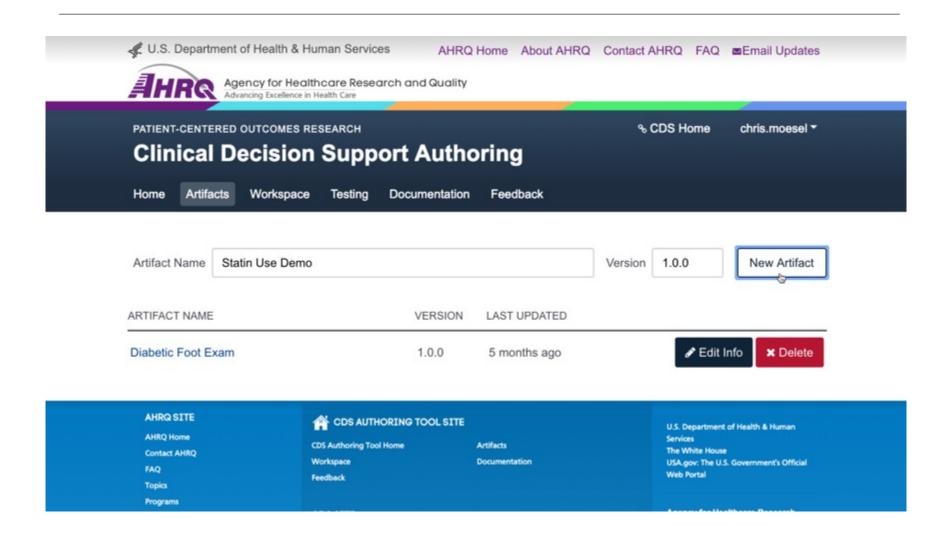


Contribute

https://cds.ahrq.gov/authoring/artifacts

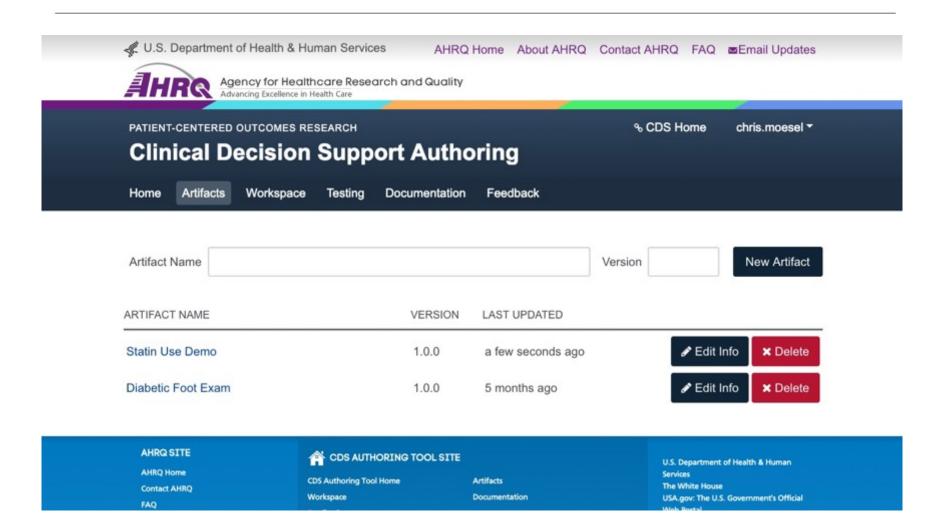


CDS Authoring Tool: Artifacts



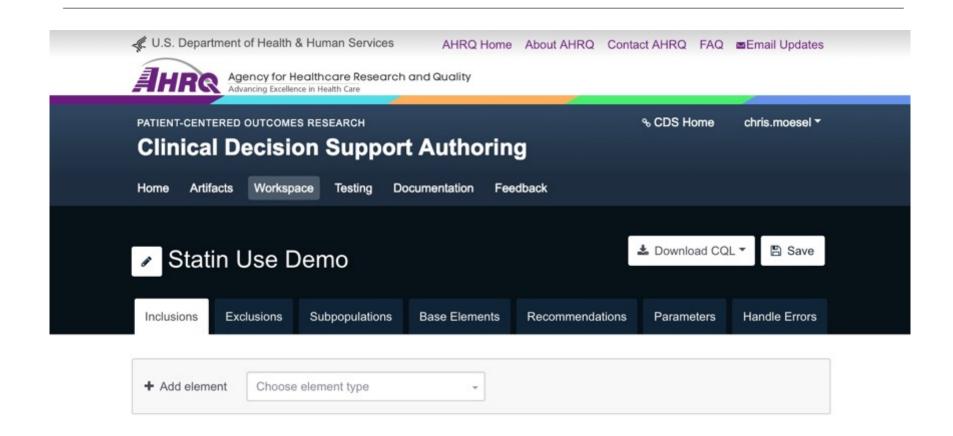


CDS Authoring Tool: Artifacts

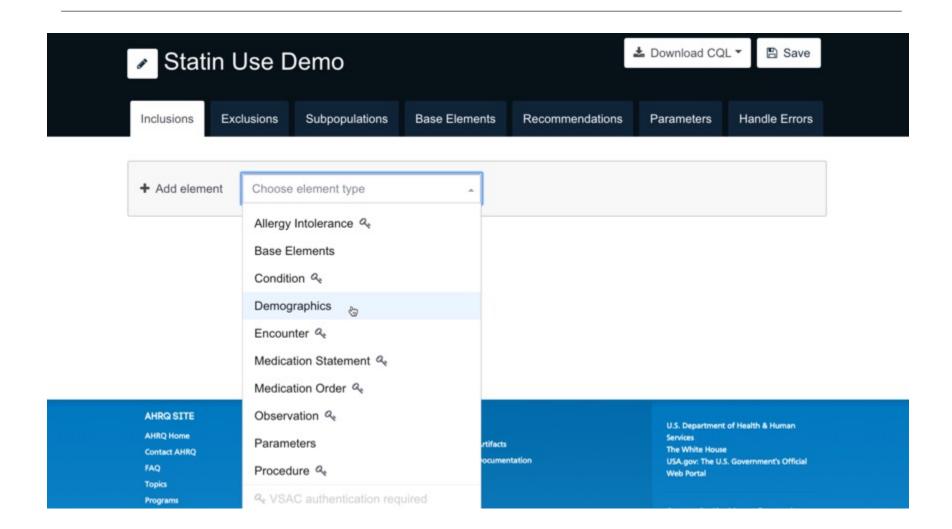




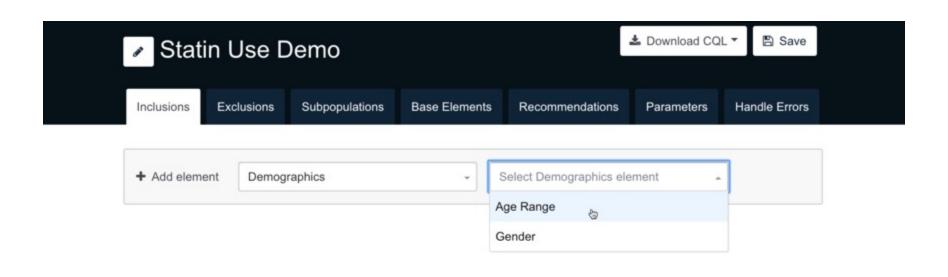
CDS Authoring Tool: Workspace





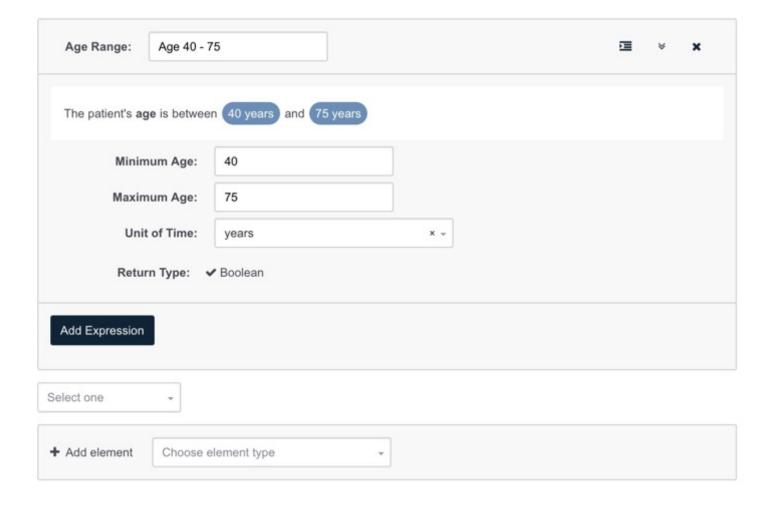




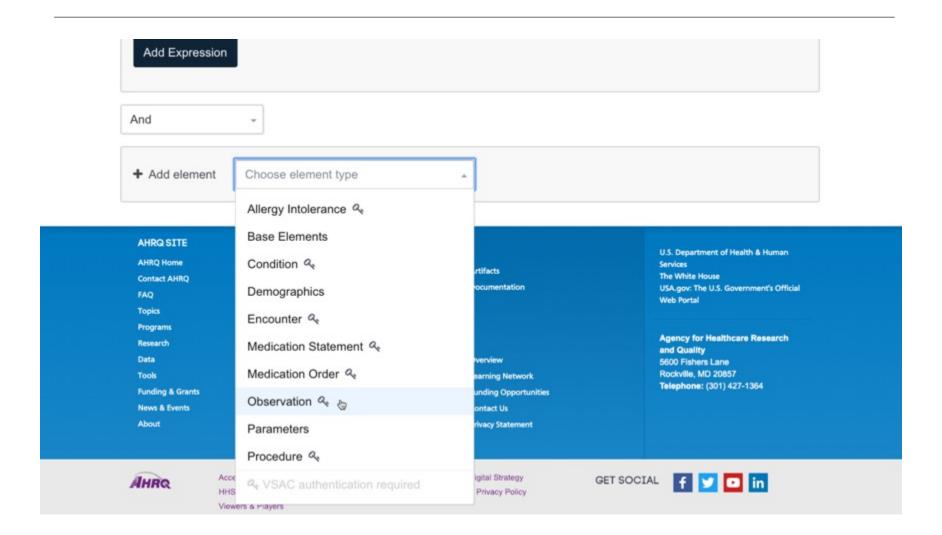




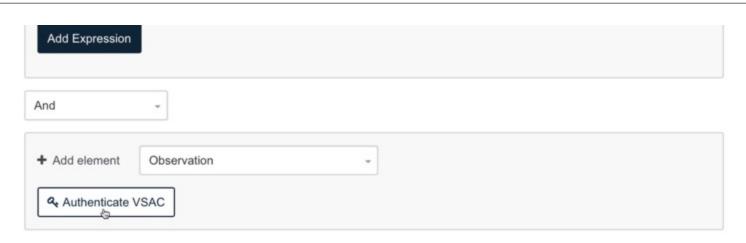


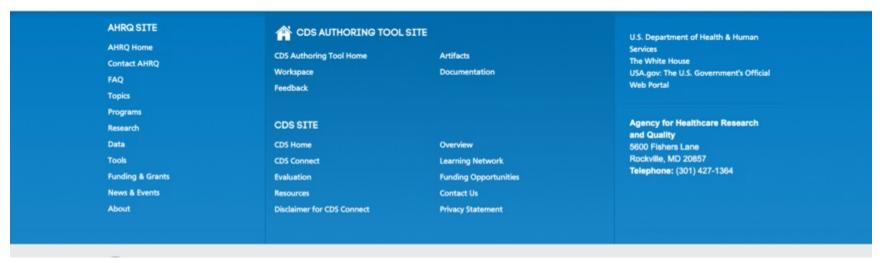




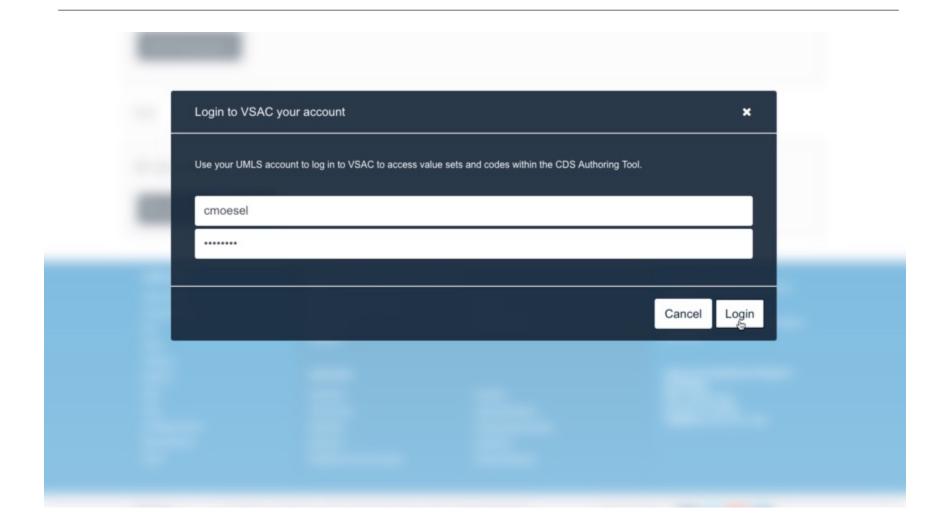




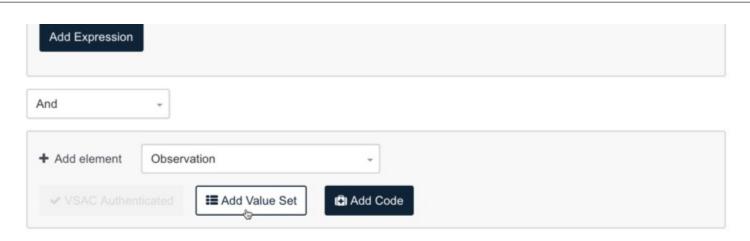


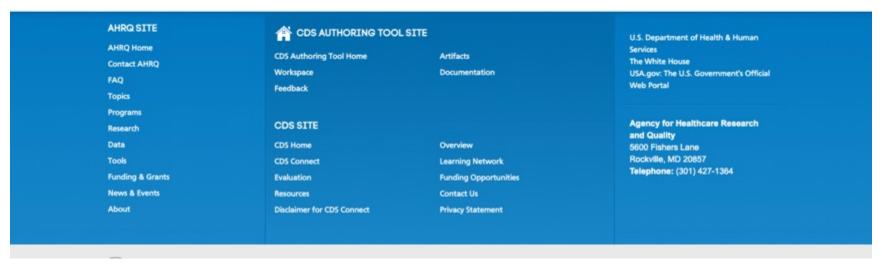




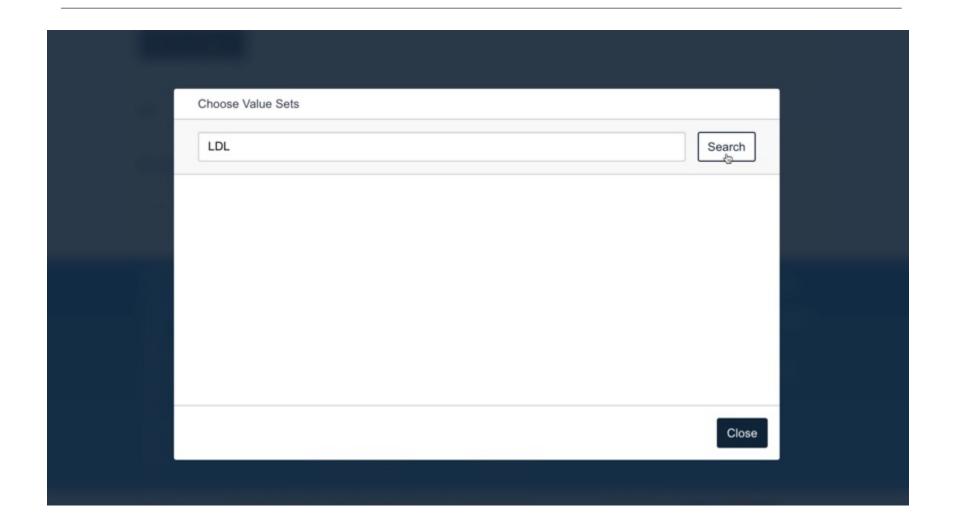




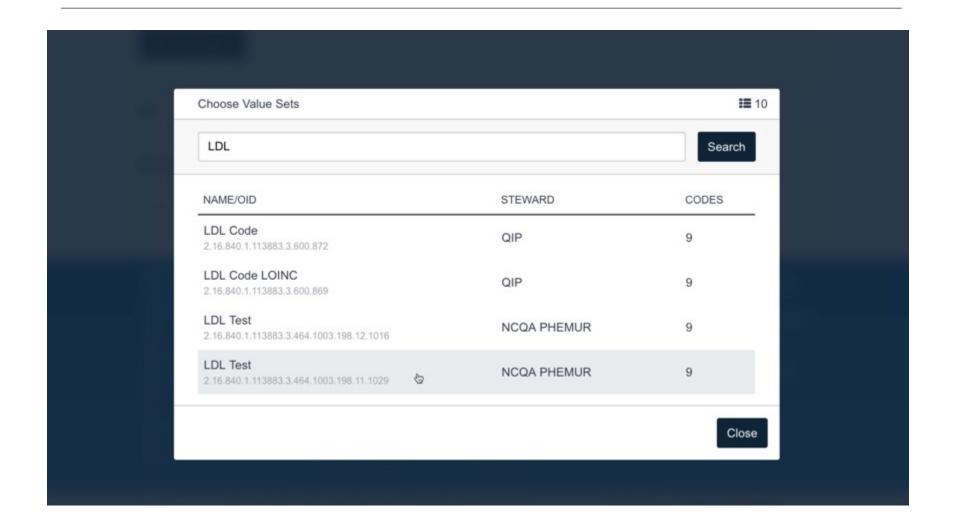




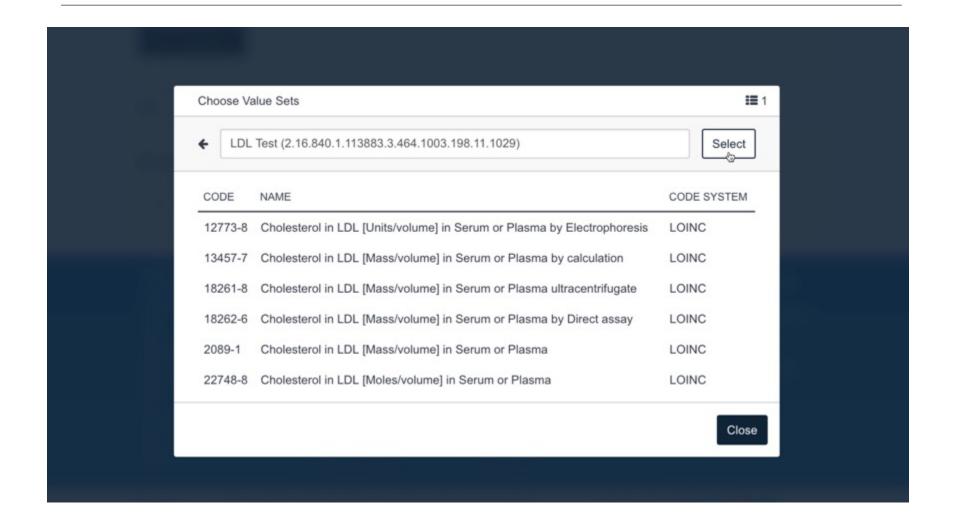




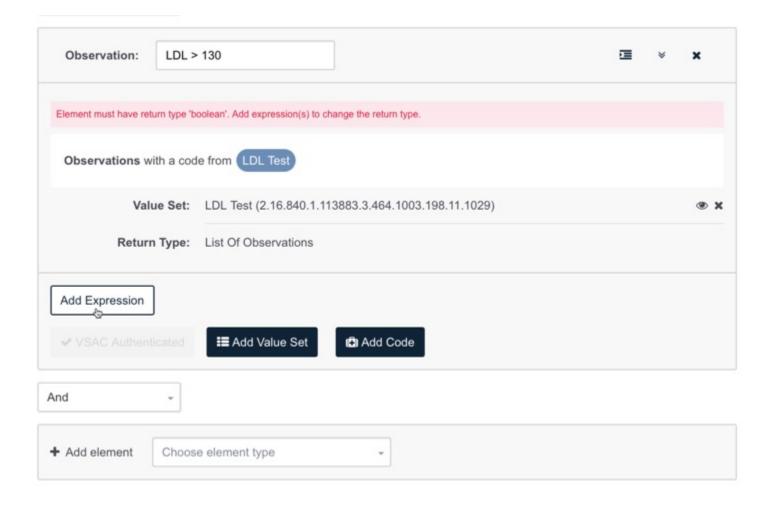




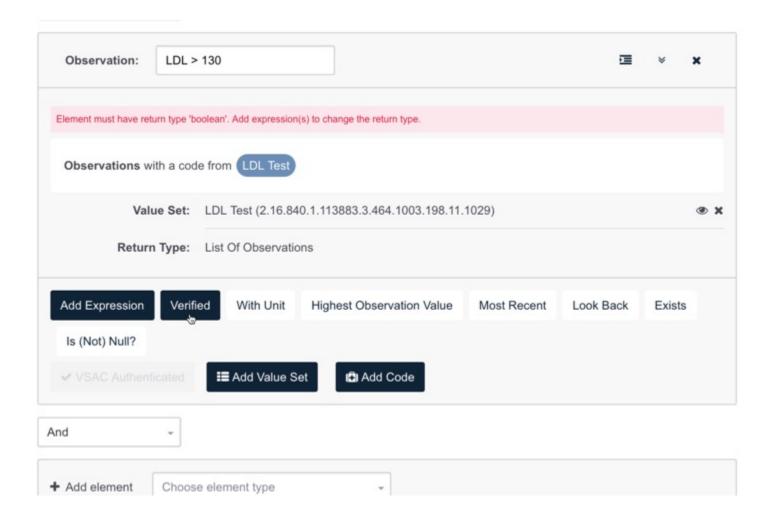




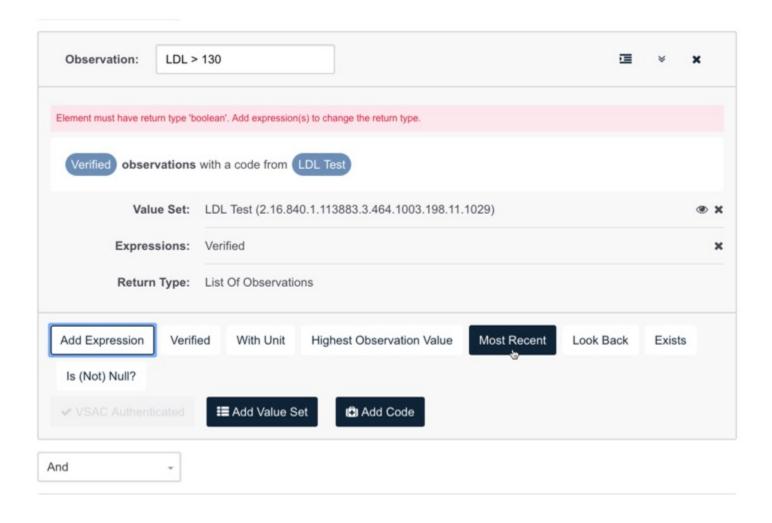




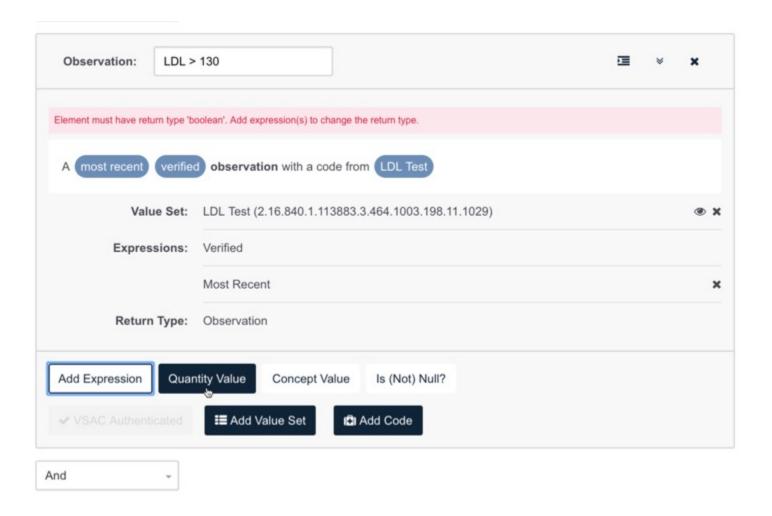




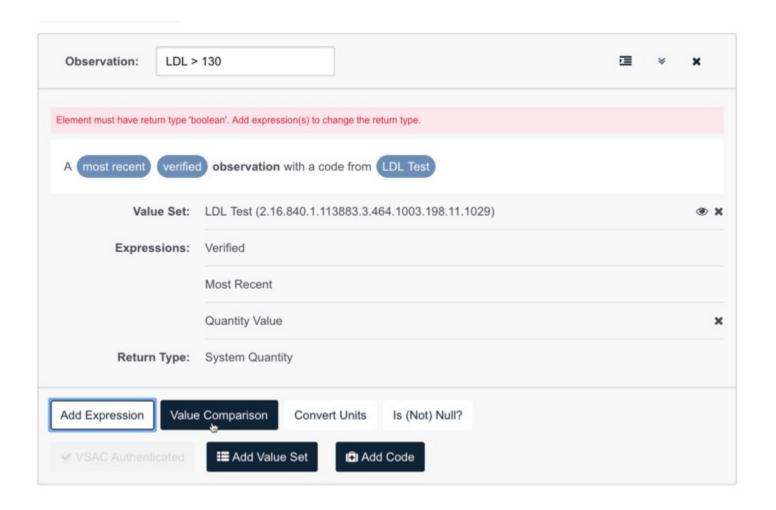




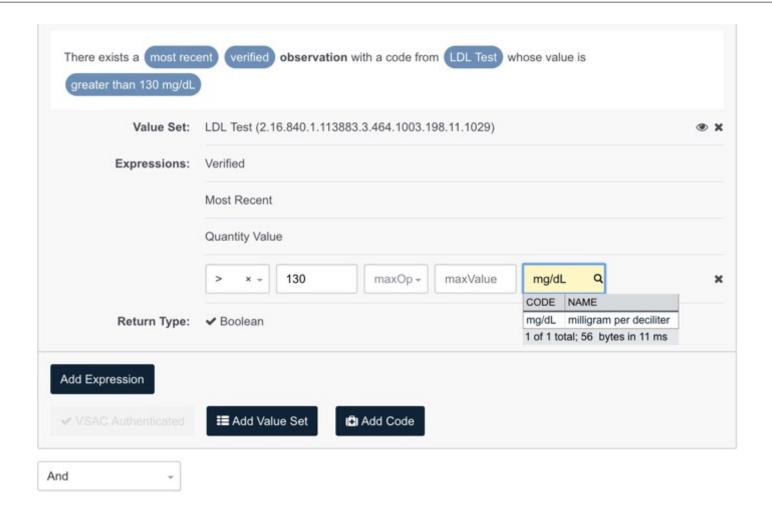




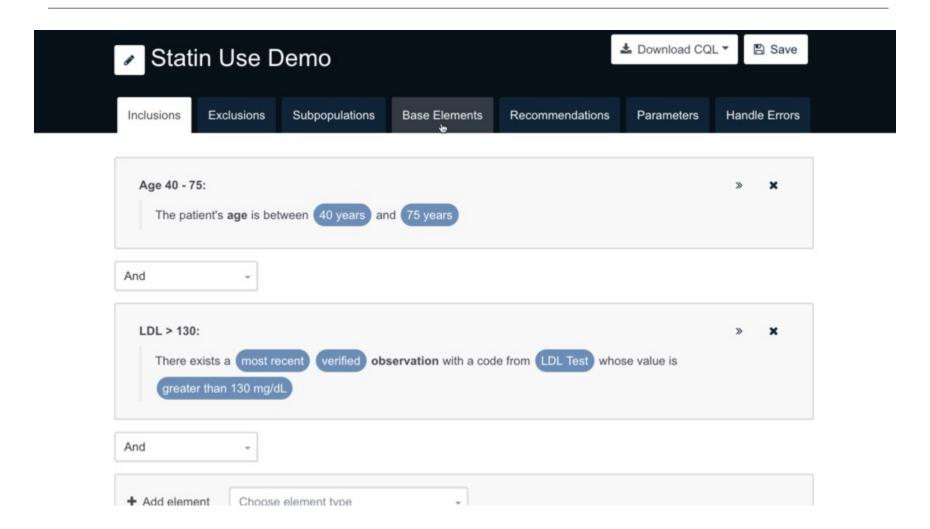




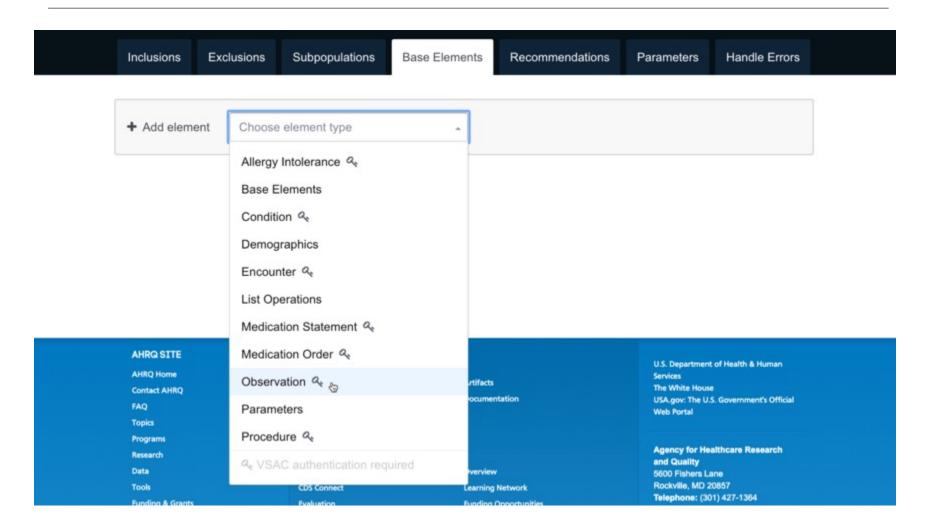










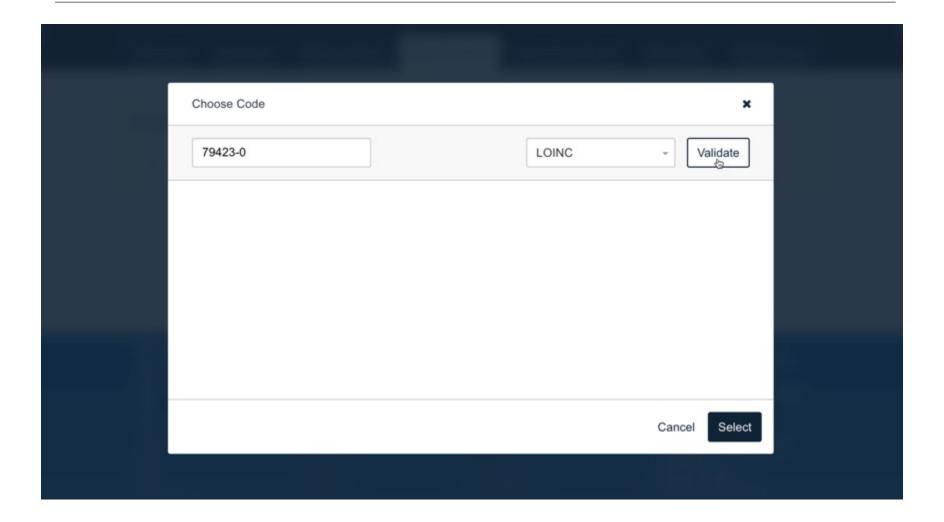




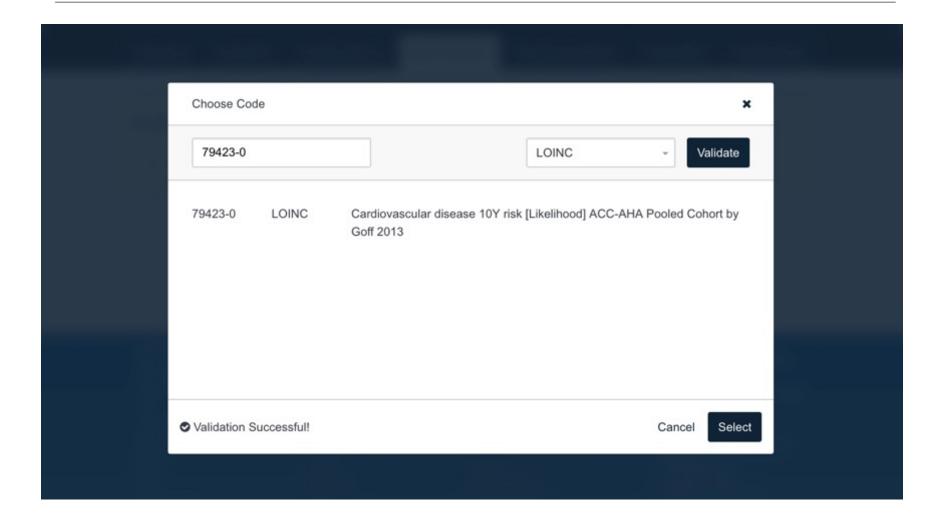
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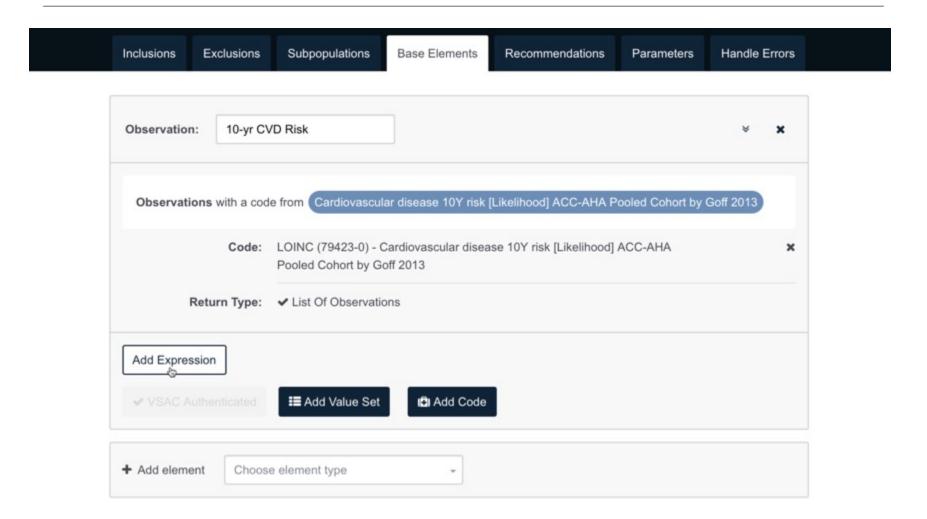




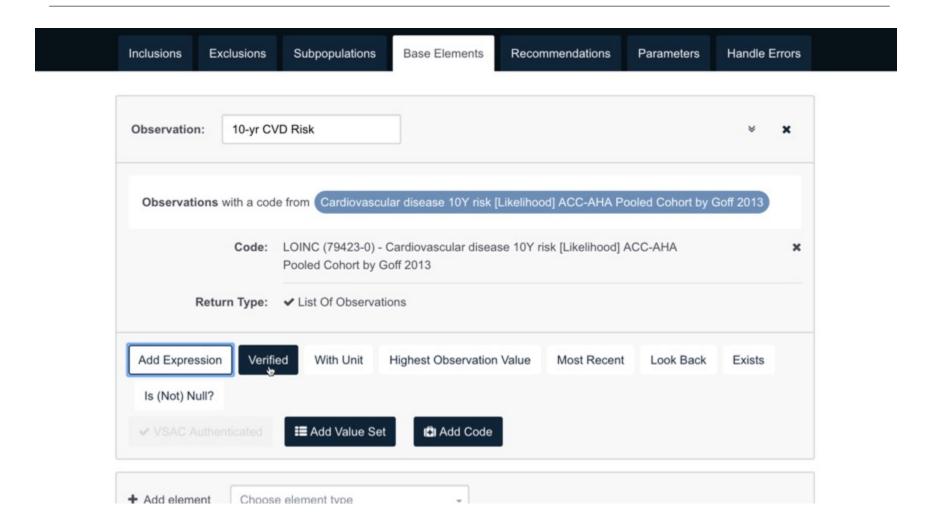




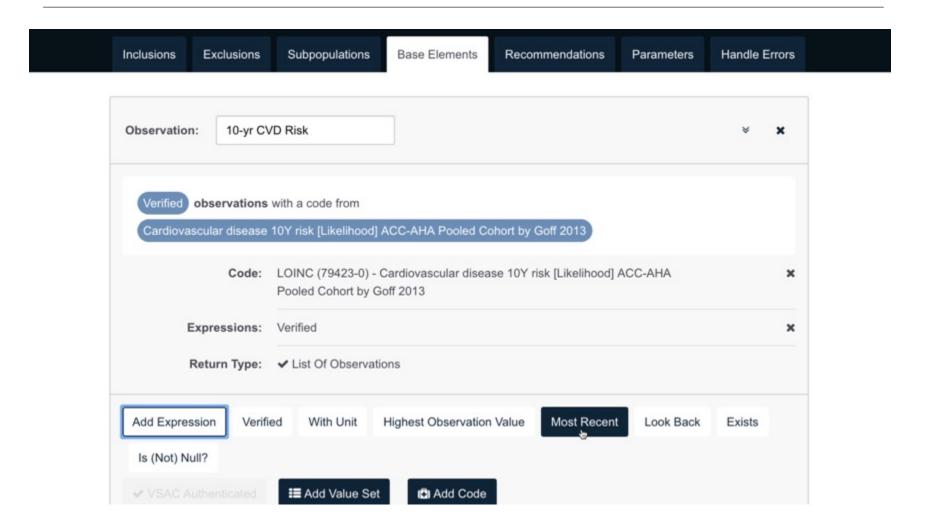




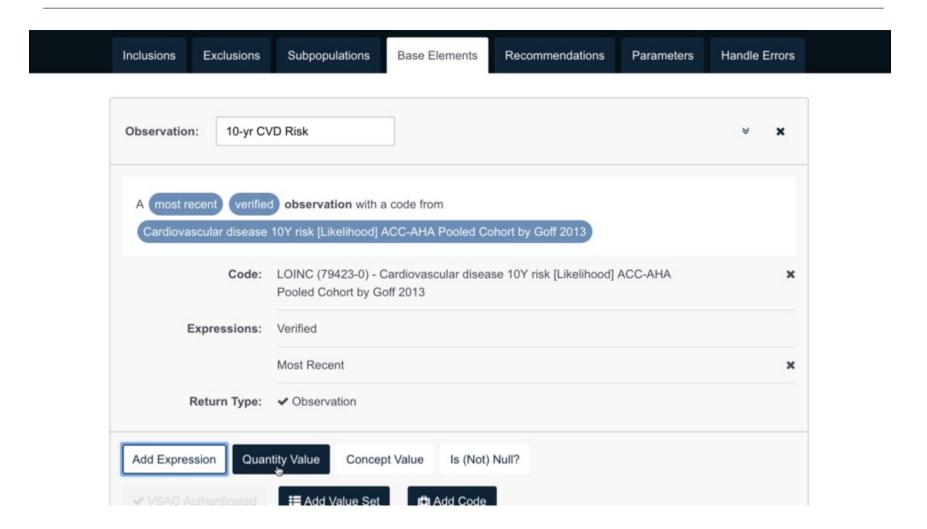




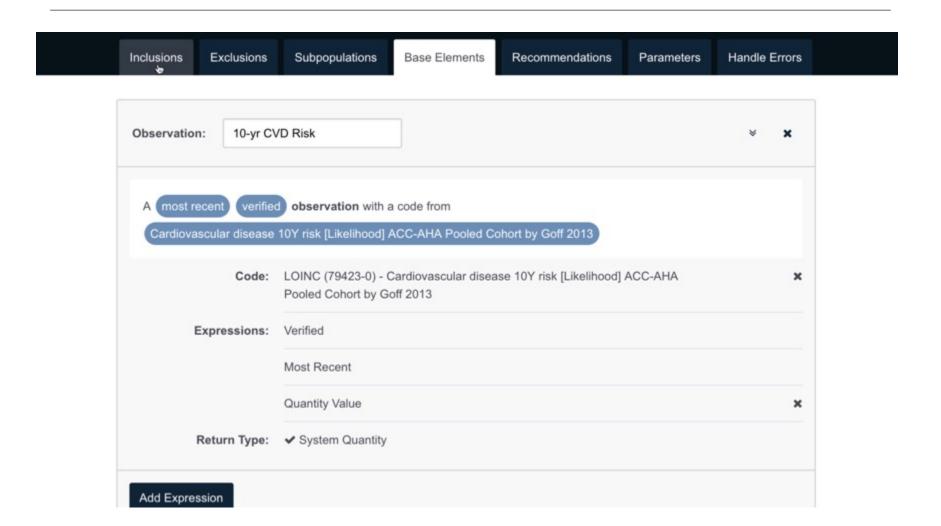




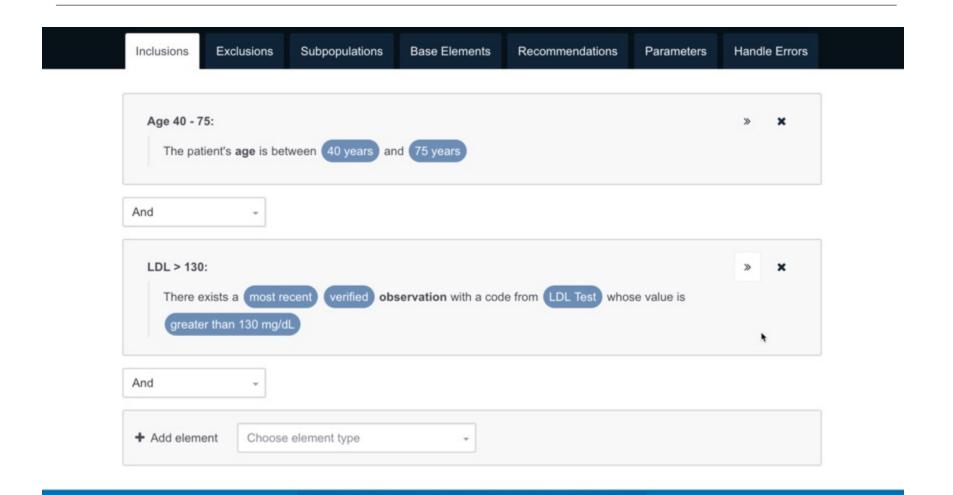




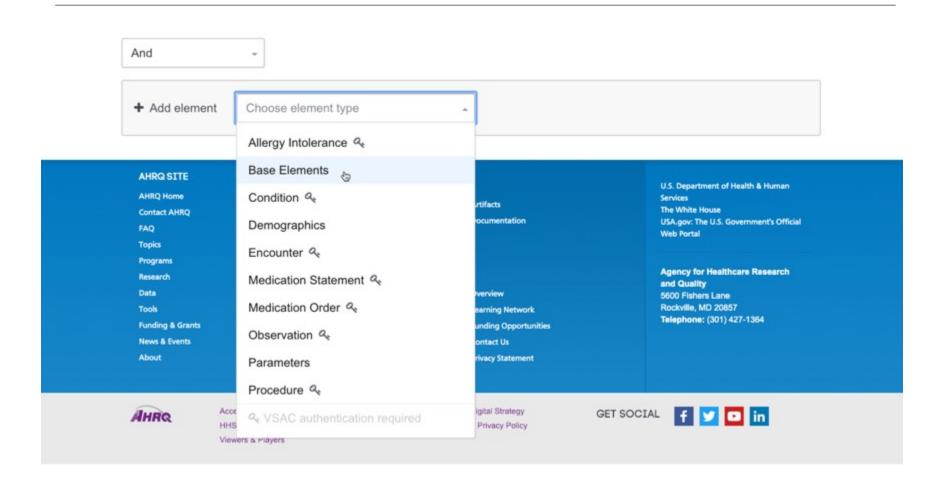




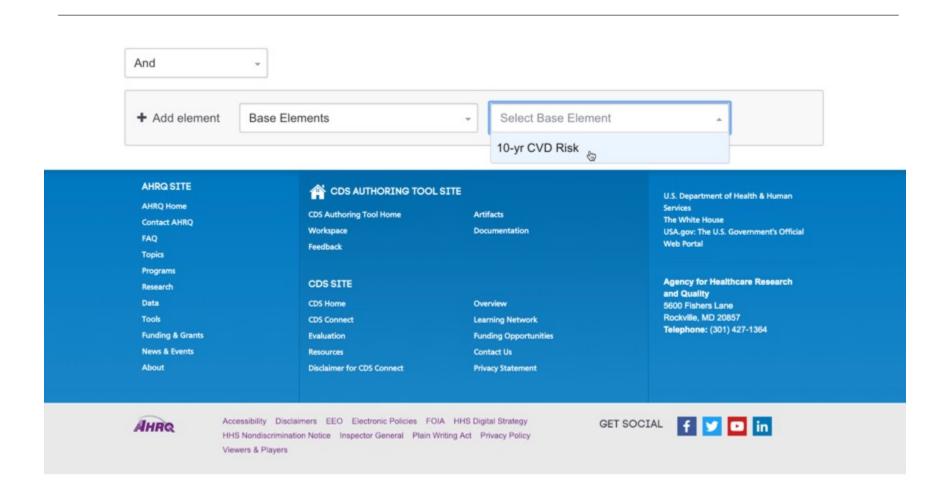




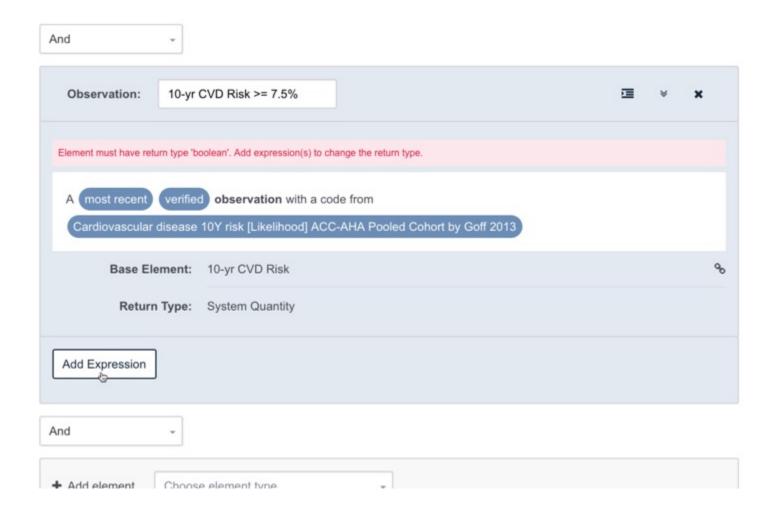




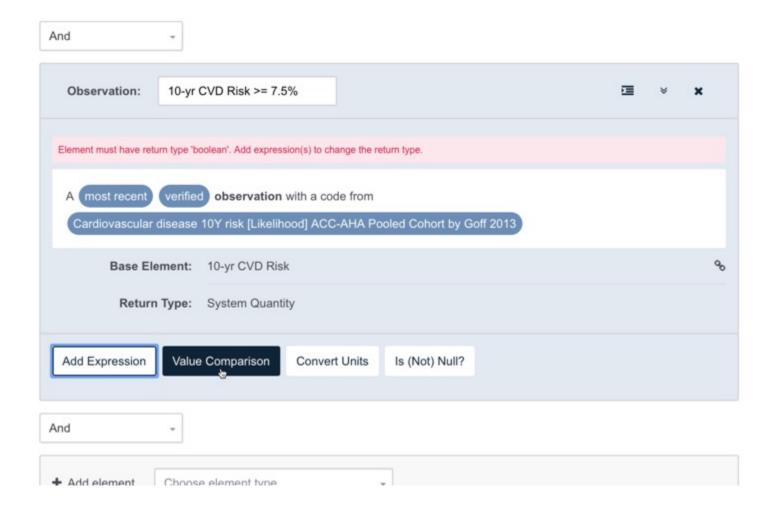




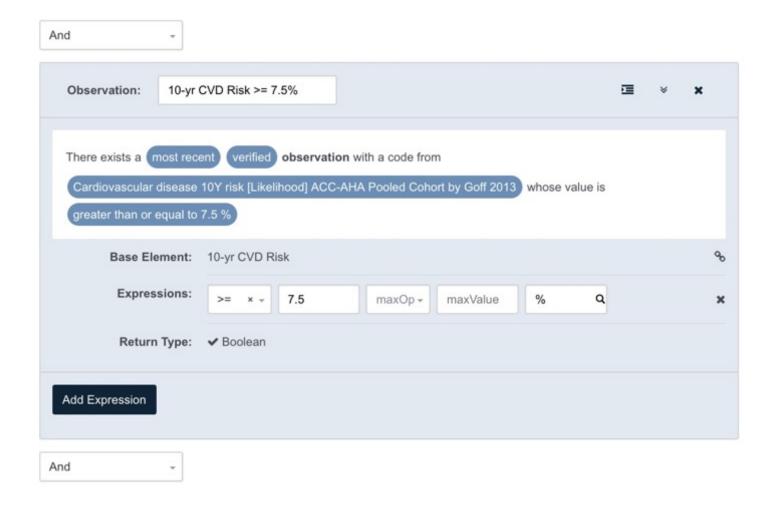




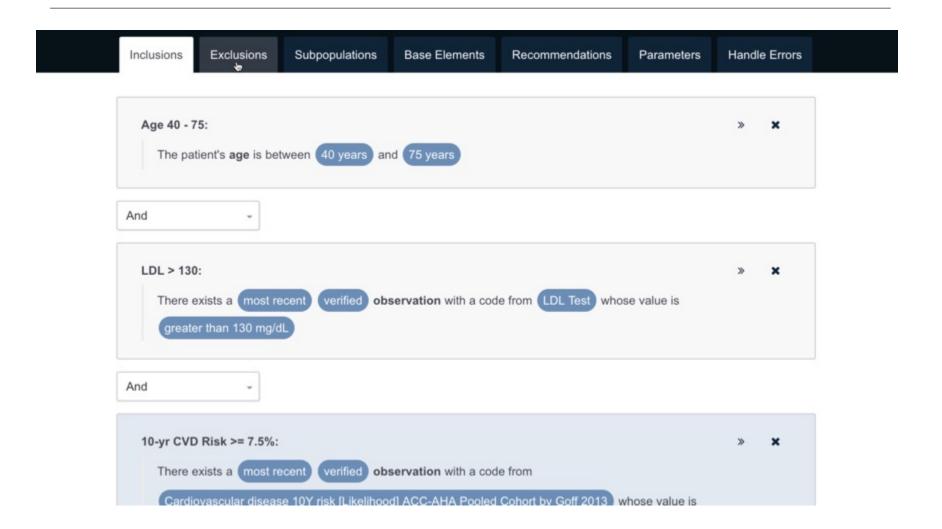




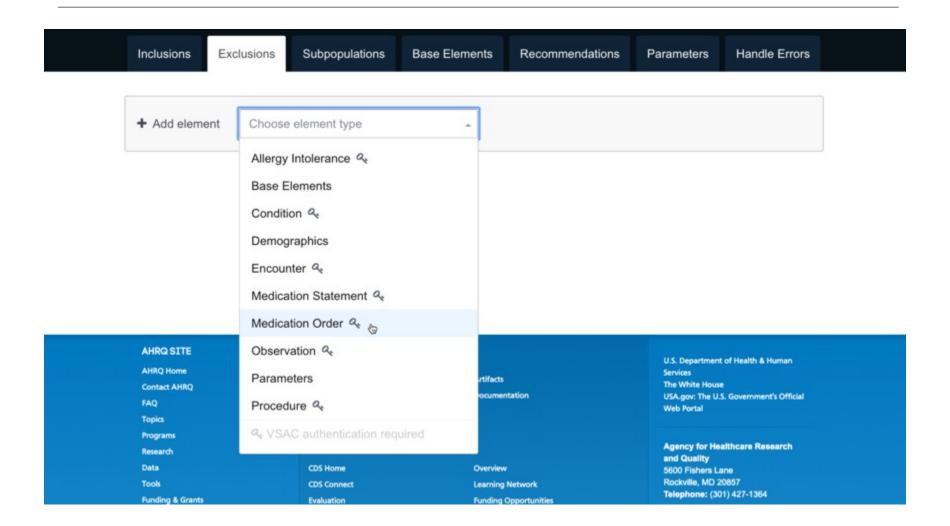




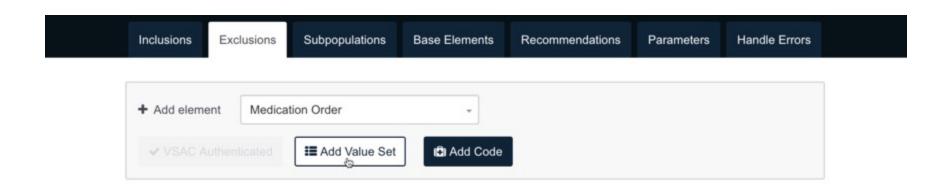






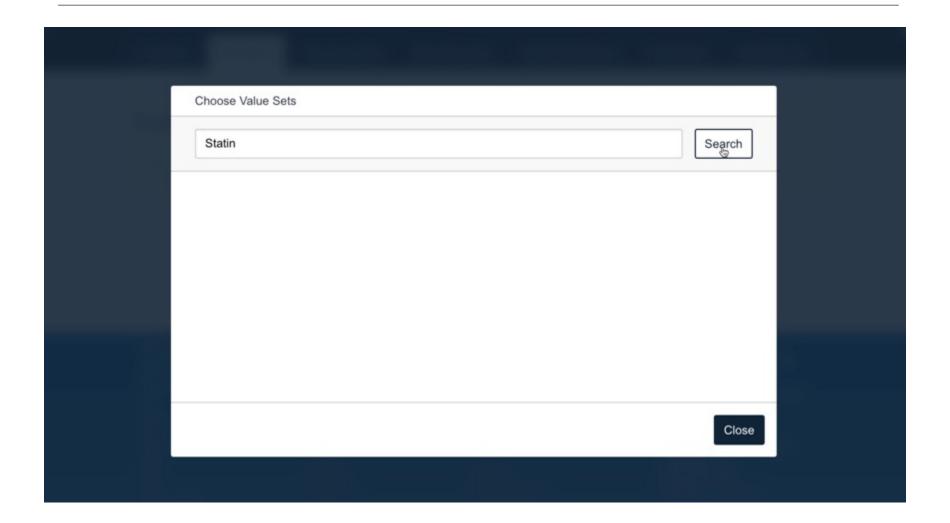




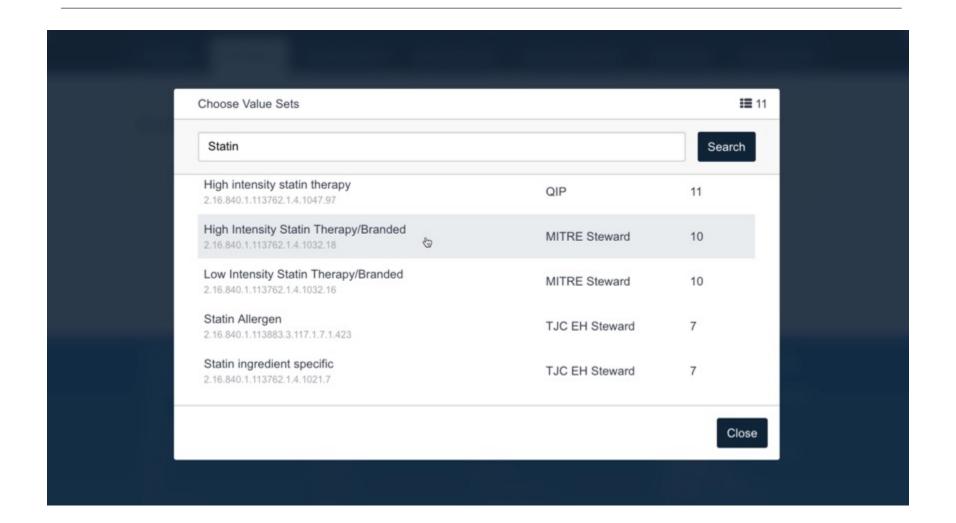


AHRQ SITE	CDS AUTHORING TOOL	LSITE	U.S. Department of Health & Human		
AHRQ Home Contact AHRQ FAQ Topics	CDS Authoring Tool Home Workspace Feedback	Artifacts Documentation	Services The White House USA.gov: The U.S. Government's Official Web Portal		
Programs Research Data Tools Funding & Grants	CDS SITE CD5 Home CD5 Connect Evaluation	Overview Learning Network Funding Opportunities	Agency for Healthcare Research and Quality 5600 Fishers Lane Rockville, MD 20857 Telephone: (301) 427-1364		

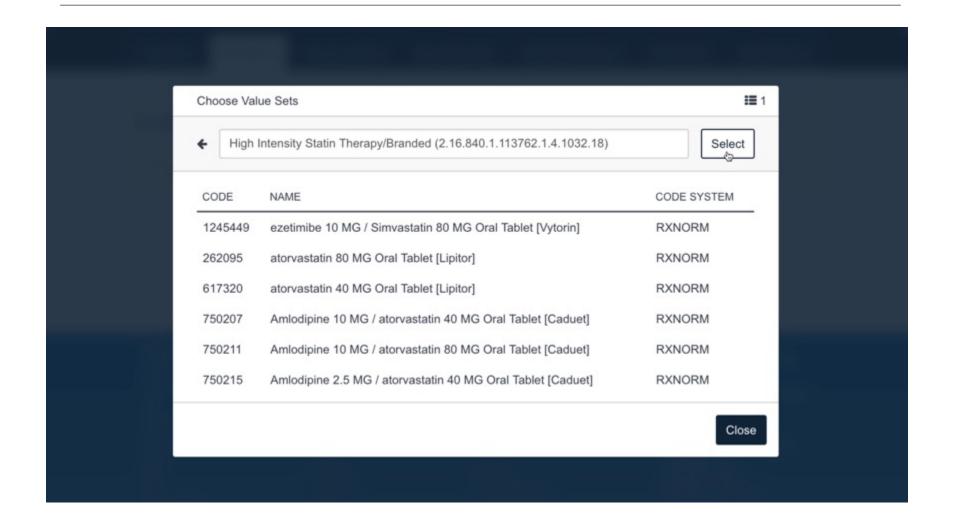




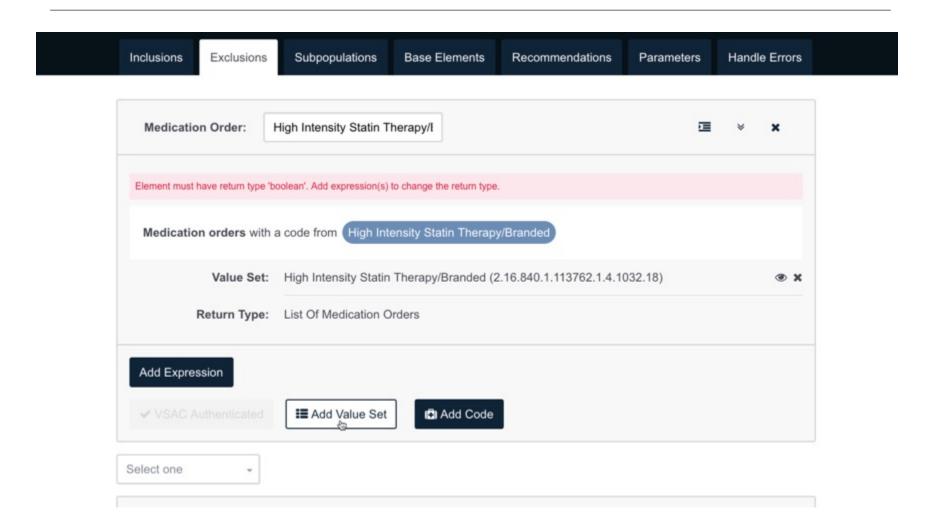




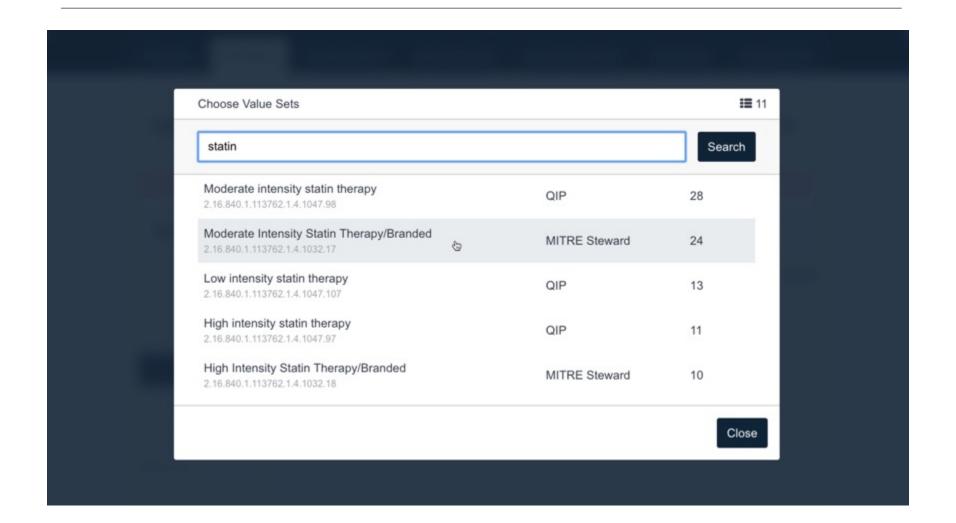




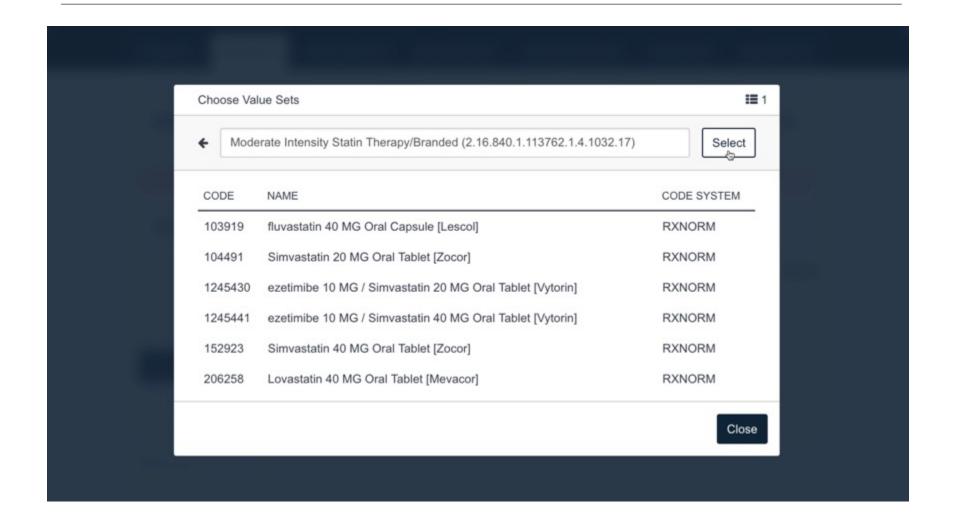




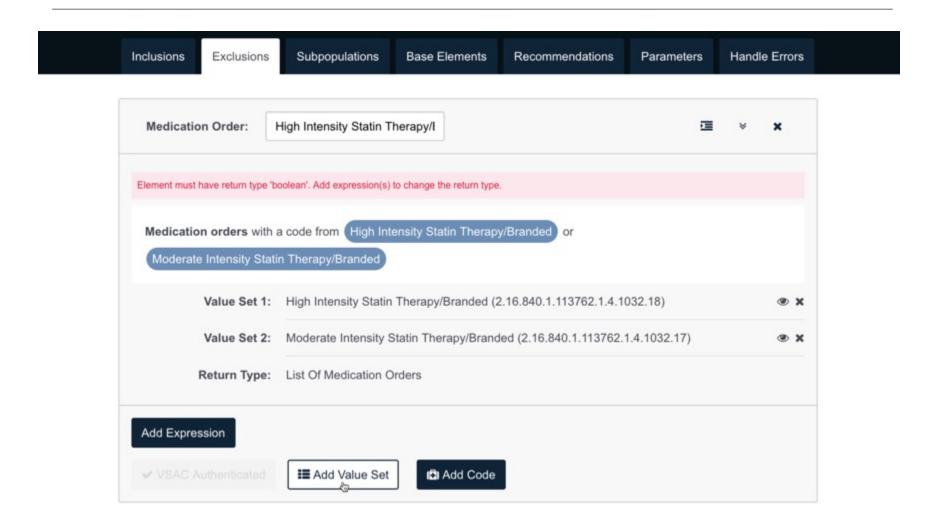




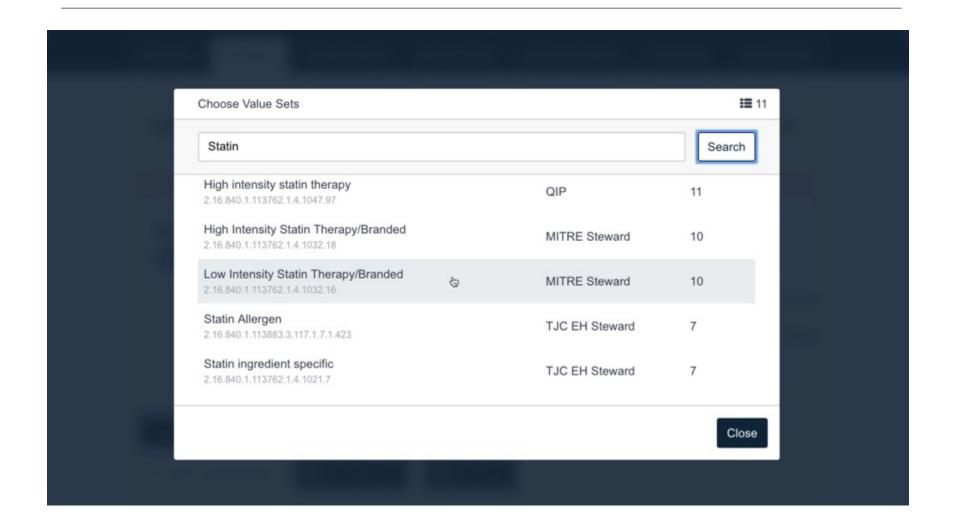




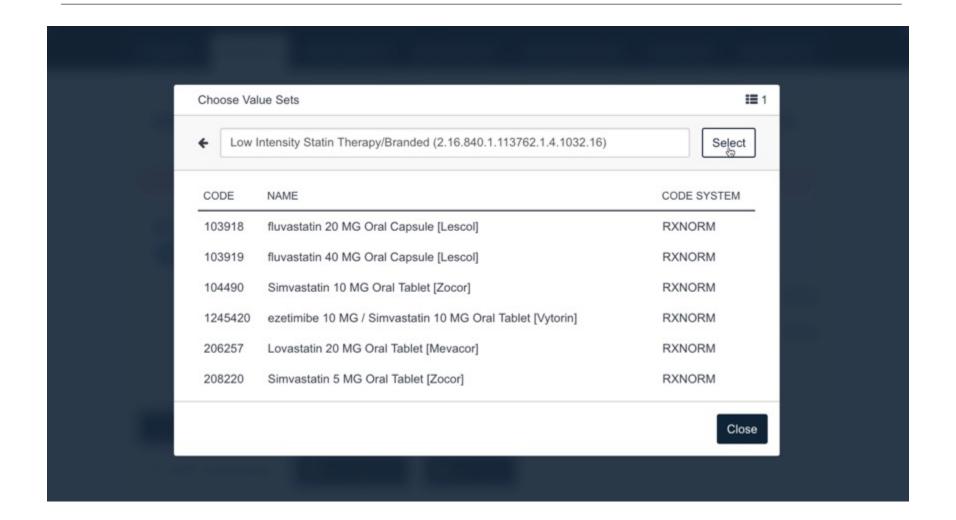




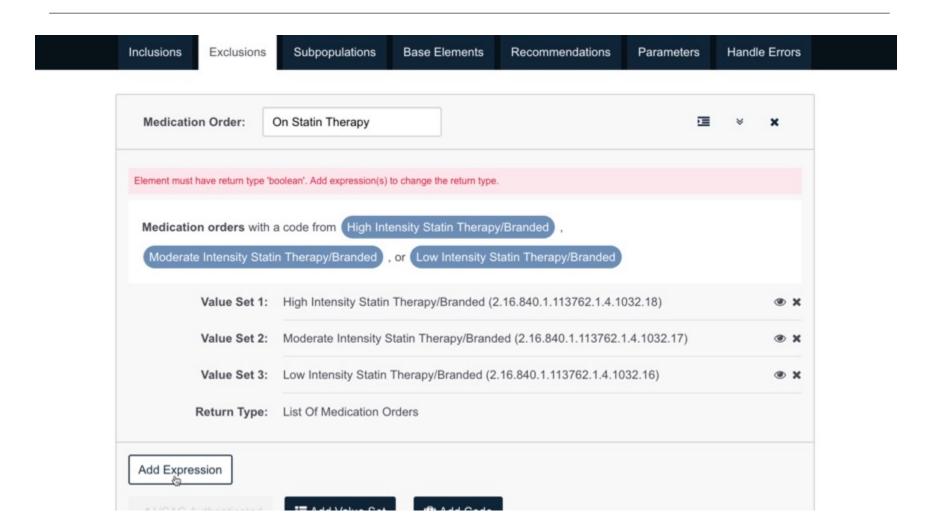




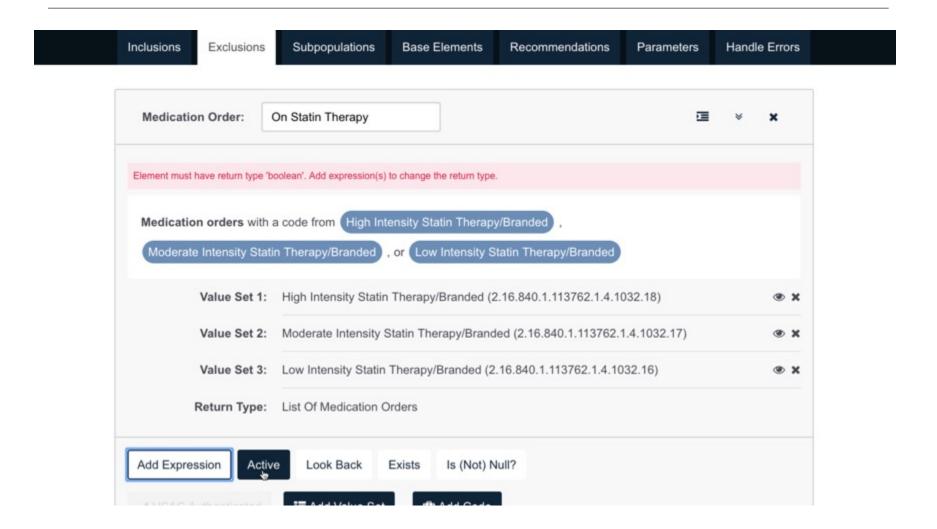




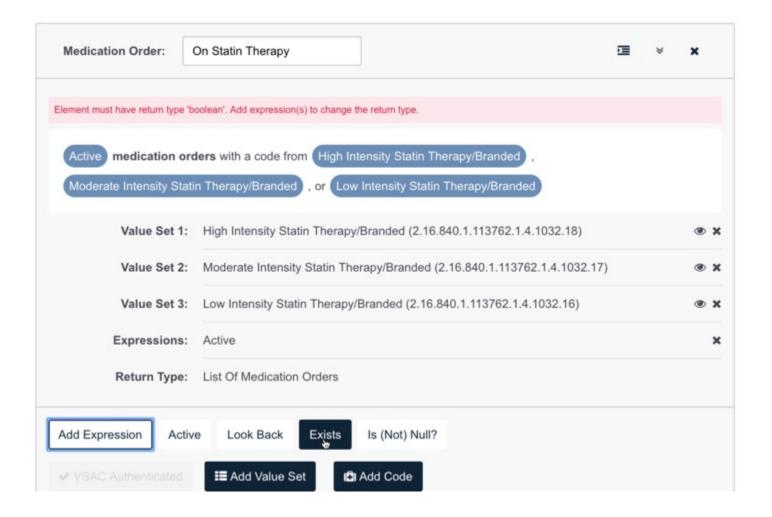




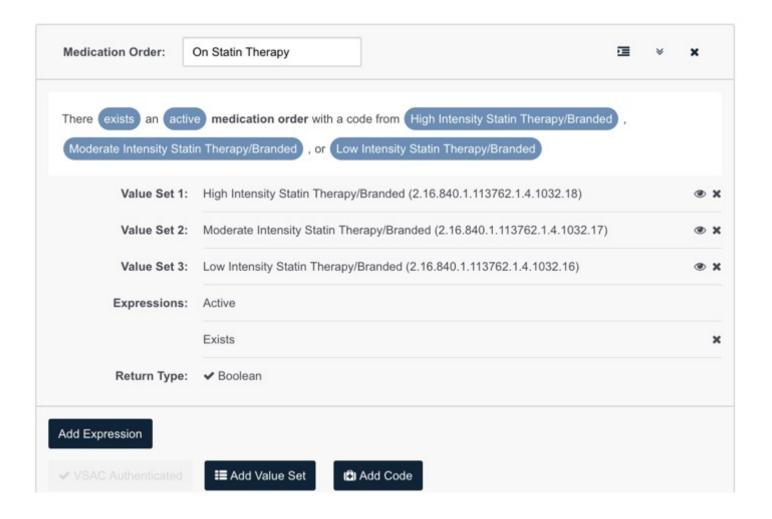




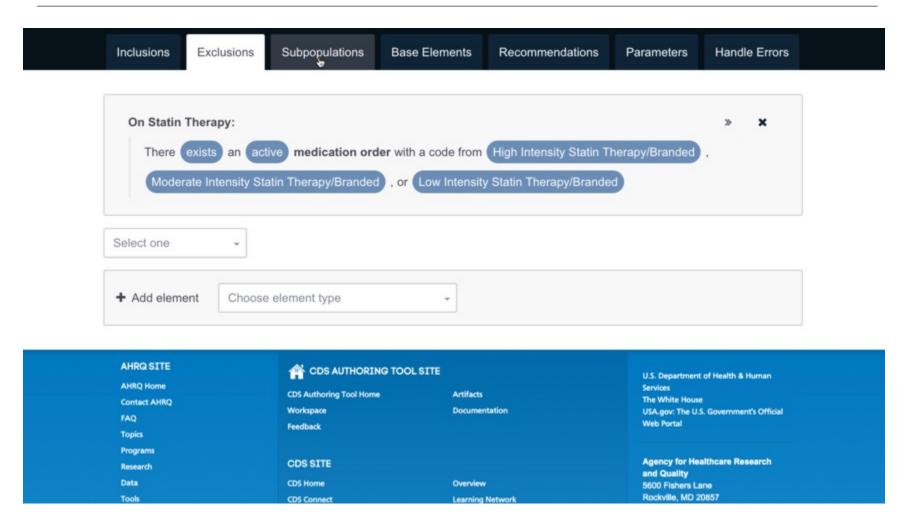




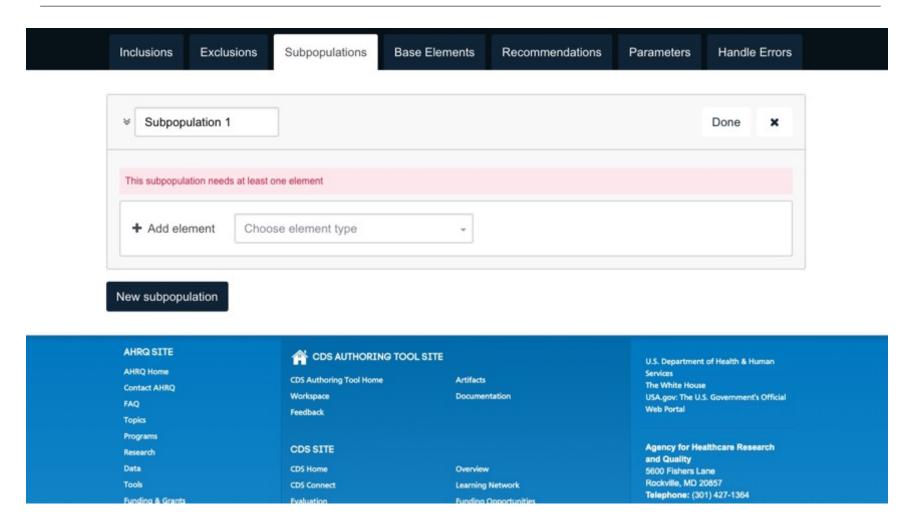




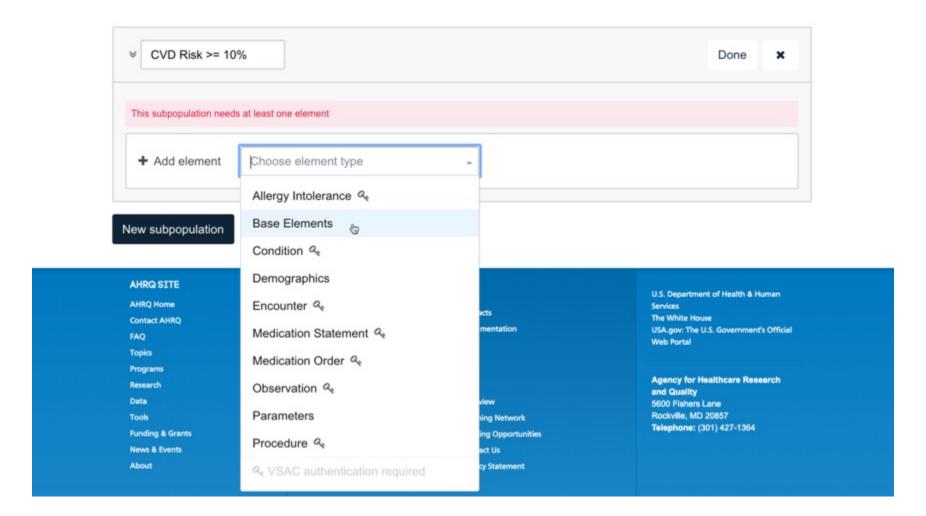










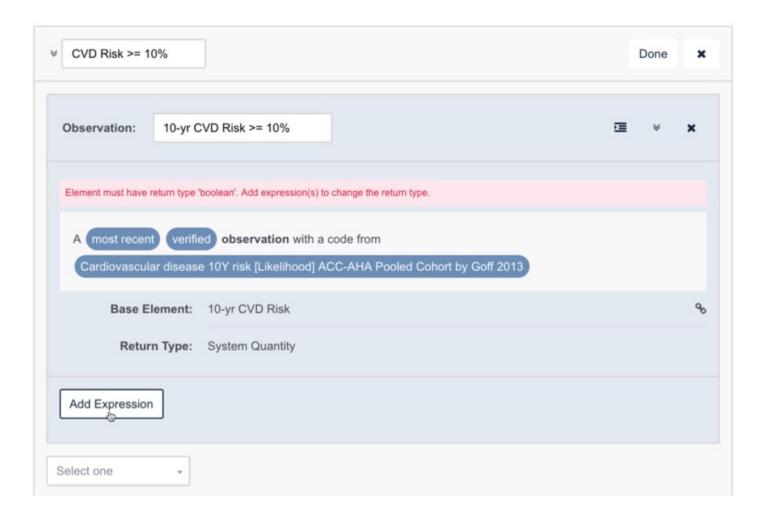




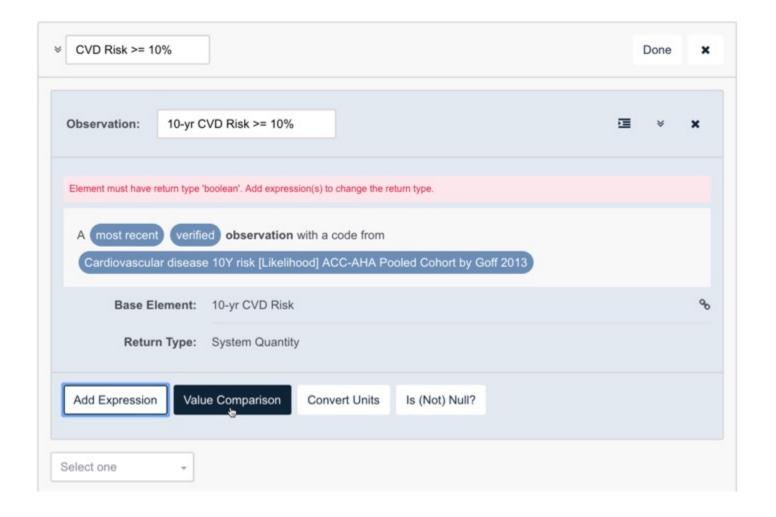
CVD Risk >= 10	%		Done
is subpopulation needs	s at least one element		
is subpopulation needs Add element	Base Elements	Select Base Element	

AHRQ SITE CDS AUTHORING TOOL SITE U.S. Department of Health & Human AHRQ Home Services CDS Authoring Tool Home Artifacts The White House Contact AHRQ Workspace Documentation USA.gov: The U.S. Government's Official FAQ Web Portal Feedback **Topics Programs** Agency for Healthcare Research CDS SITE Research and Quality Data CDS Home Overview 5600 Fishers Lane Rockville, MD 20857 **CDS Connect** Learning Network Telephone: (301) 427-1364 Funding & Grants Evaluation **Funding Opportunities** News & Events Contact Us Resources About Disclaimer for CDS Connect **Privacy Statement**

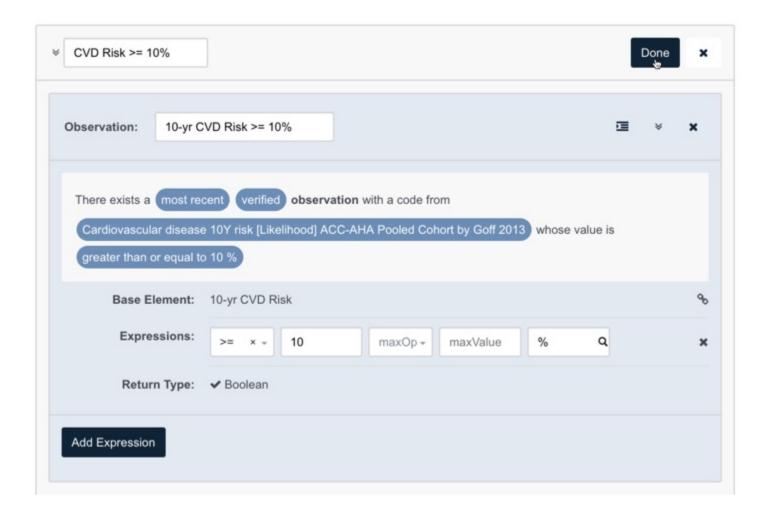






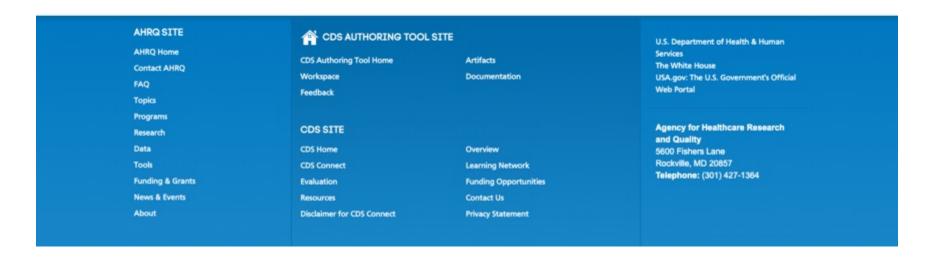




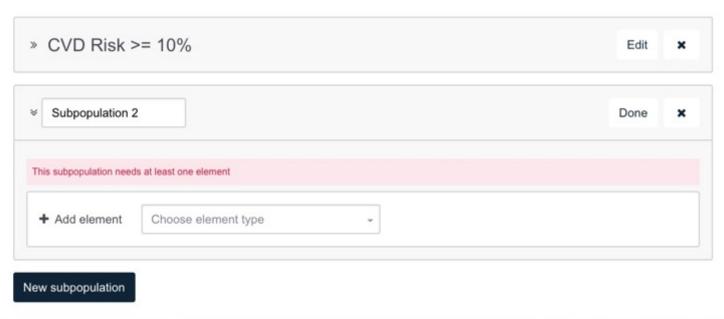






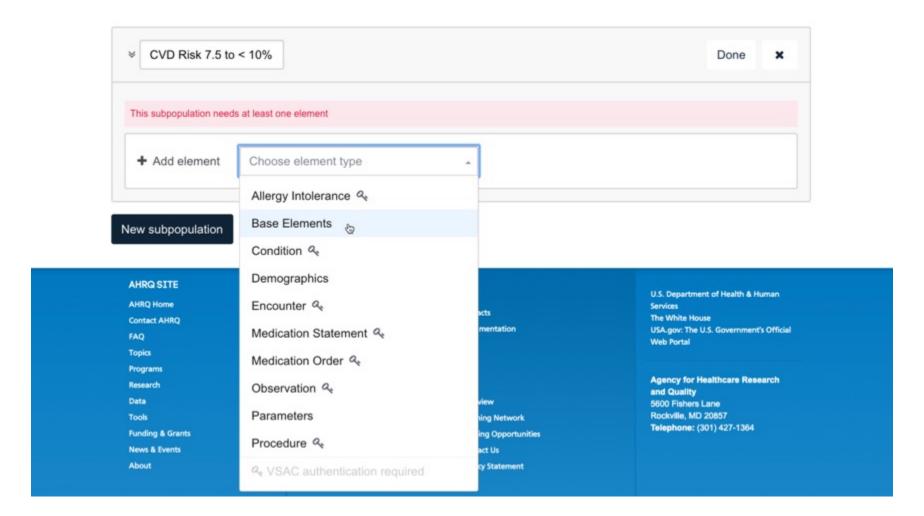






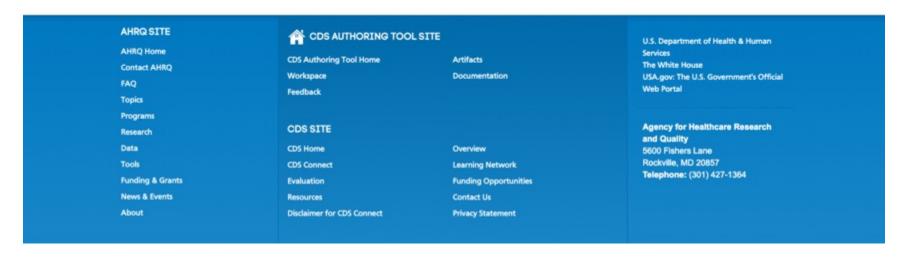
AHRQ SITE	CDS AUTHORING TOO	LSITE	U.S. Department of Health & Human
AHRQ Home	CDS Authoring Tool Home	Artifacts	Services
Contact AHRQ	Workspace	Documentation	The White House USA.gov: The U.S. Government's Official
FAQ	Feedback		Web Portal
Topics	Peedback		
Programs			
Research	CDS SITE		Agency for Healthcare Research and Quality
Data	CDS Home	Overview	5600 Fishers Lane
Tools	CD5 Connect	Learning Network	Rockville, MD 20857



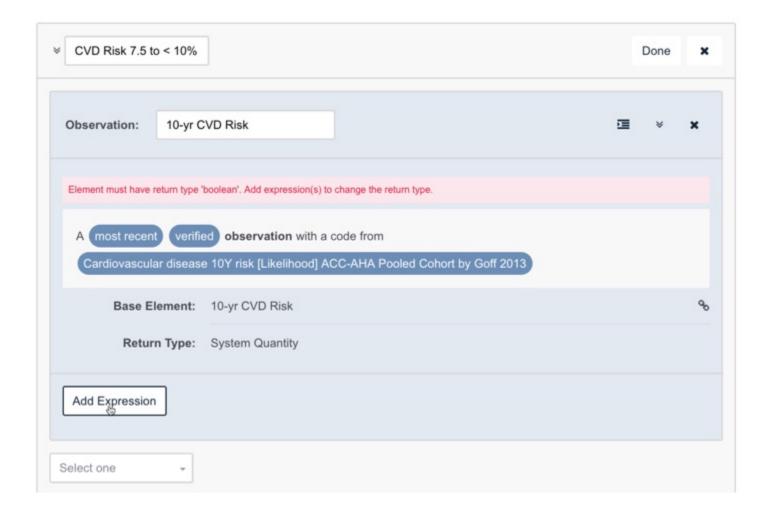




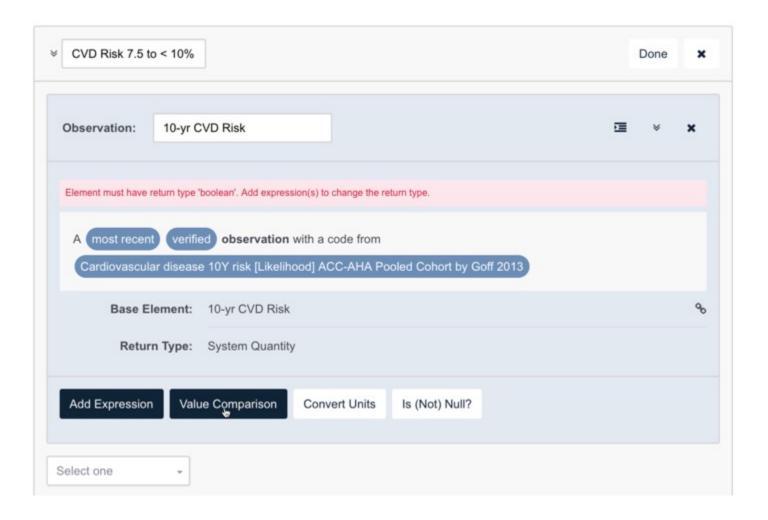
CVD Risk 7.5 to	< 10%			Done
s subpopulation need:	s at least one element			
Add element	Base Elements	- Se	elect Base Element	



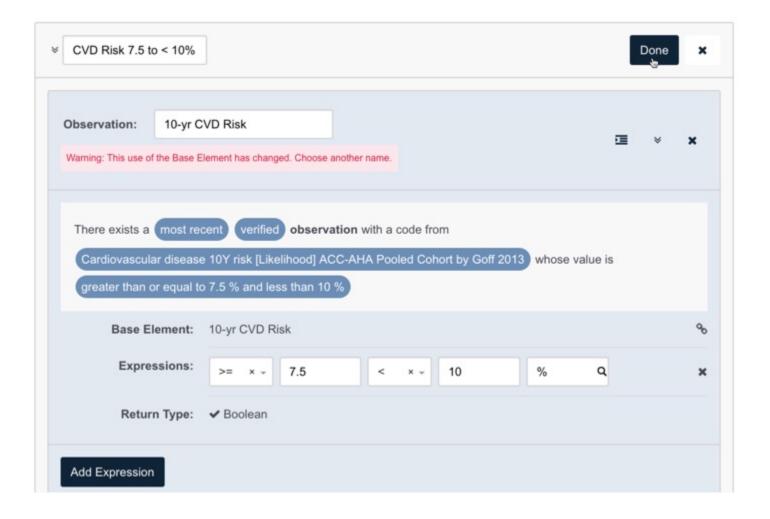




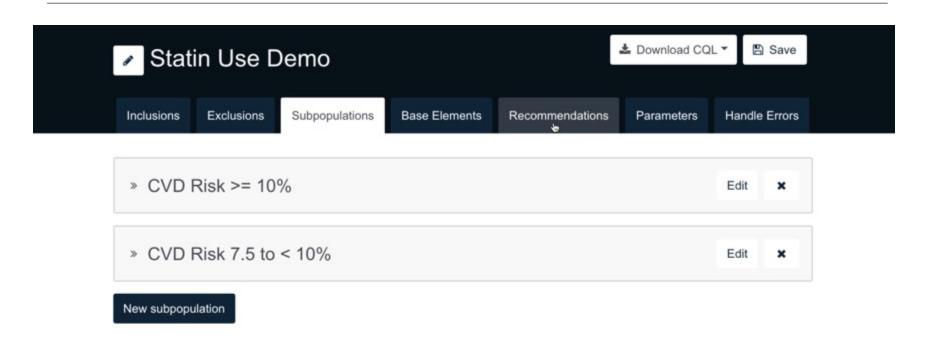






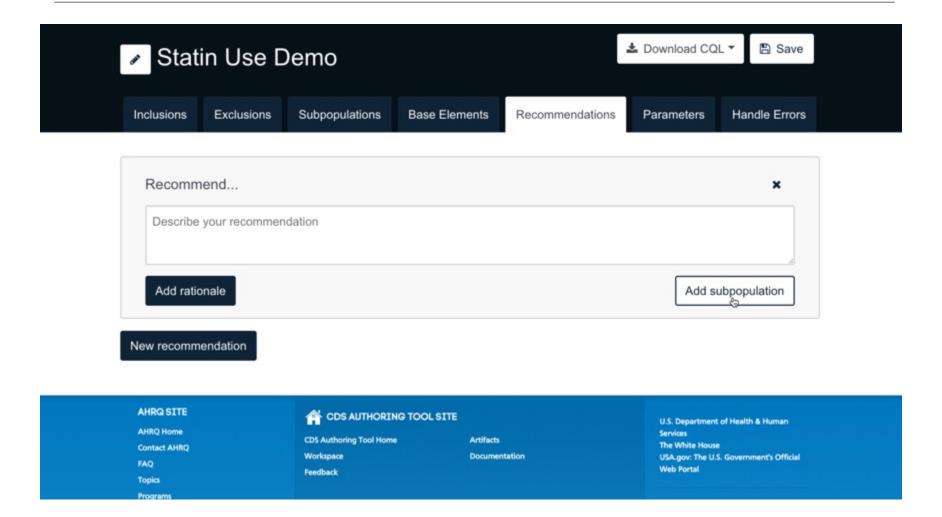




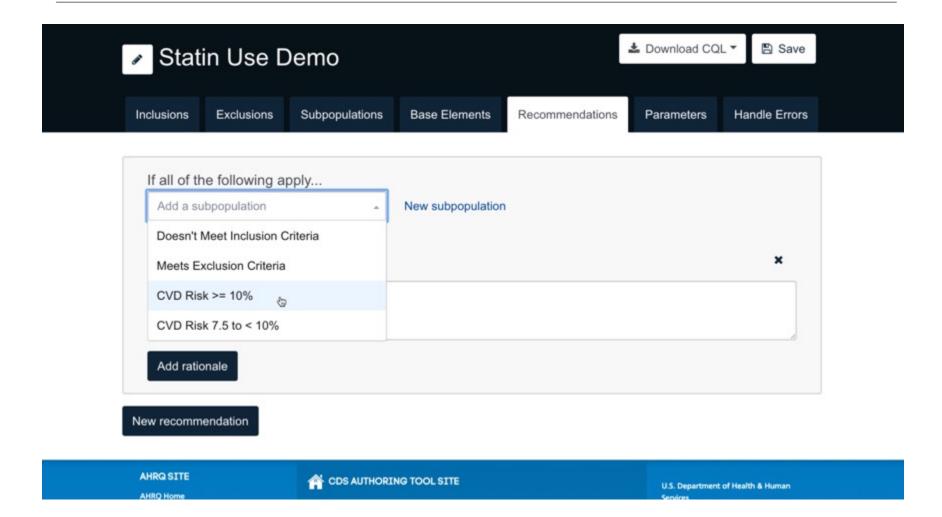




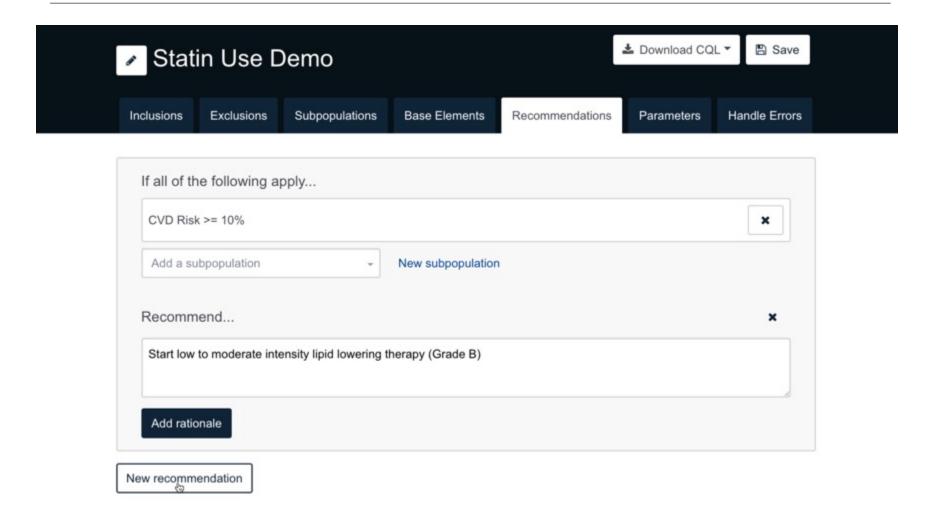














Recommend	×
Describe your recommendation	
Add rationale	Add subpopulation





Add a subpopulation	New subpopulation	
Doesn't Meet Inclusion Criteria		
Meets Exclusion Criteria		×
CVD Risk >= 10%		
CVD Risk 7.5 to < 10%		
Add rationale		

New recommendation

AHRQ SITE AHRQ Home Contact AHRQ FAQ Topics	CDS AUTHORING TOOL CDS Authoring Tool Home Workspace Feedback	Artifacts Documentation	U.S. Department of Health & Human Services The White House USA.gov: The U.S. Government's Official Web Portal
Programs Research Data Tools Funding & Grants	CDS SITE CDS Home CDS Connect Evaluation	Overview Learning Network Funding Opportunities	Agency for Healthcare Research and Quality 5600 Fishers Lane Rockville, MD 20857 Telephone: (301) 427-1364

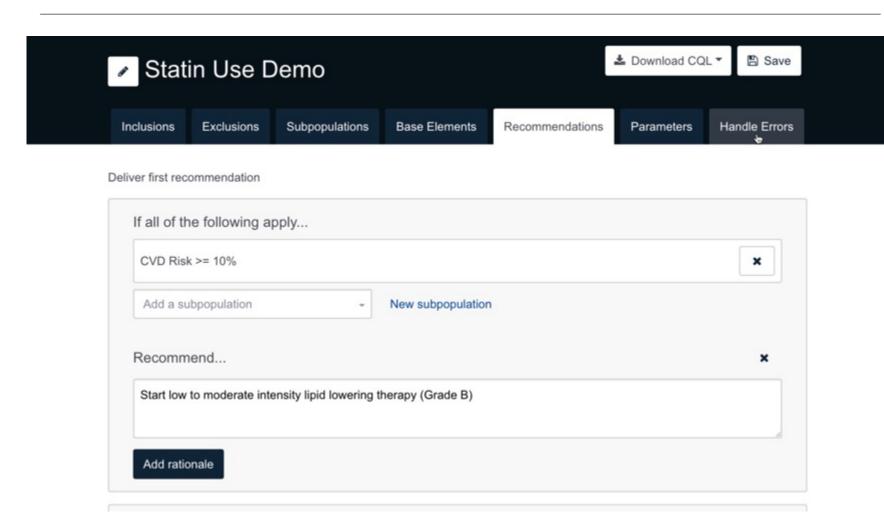


CVD Risk 7.5 to < 10%		×
Add a subpopulation	→ New subpopulation	
ecommend		×
Discuss low to moderate intensity lip	pid lowering therapy (Grade C)	
Add rationale		

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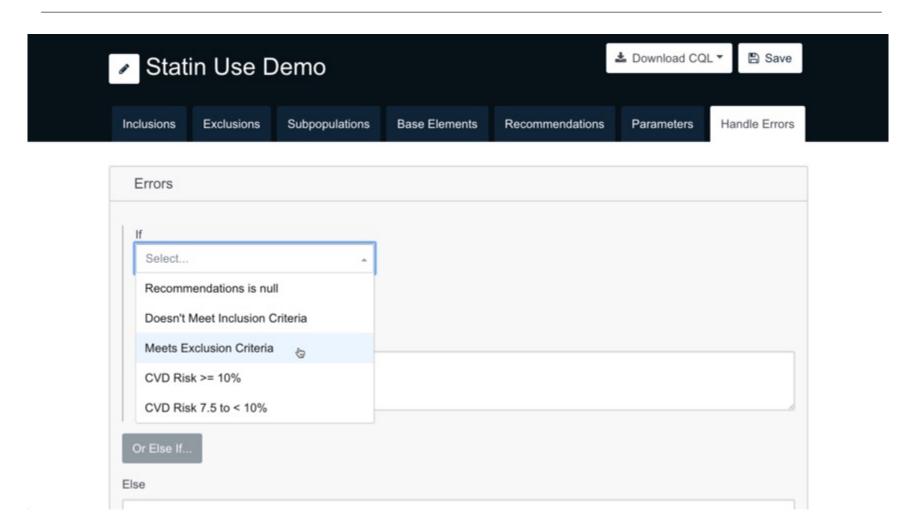


CDS Authoring Tool: Handle Errors



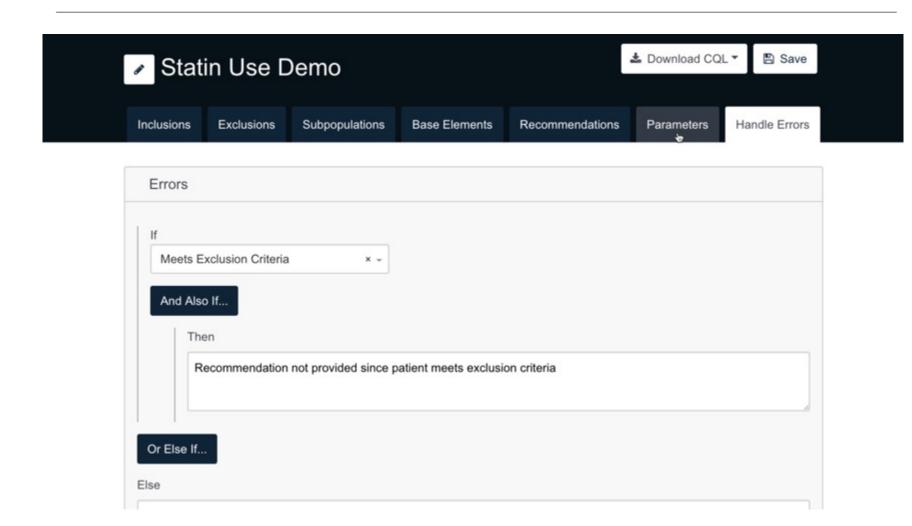


CDS Authoring Tool: Handle Errors

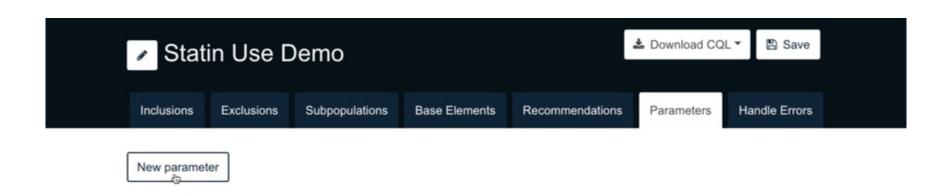




CDS Authoring Tool: Parameters

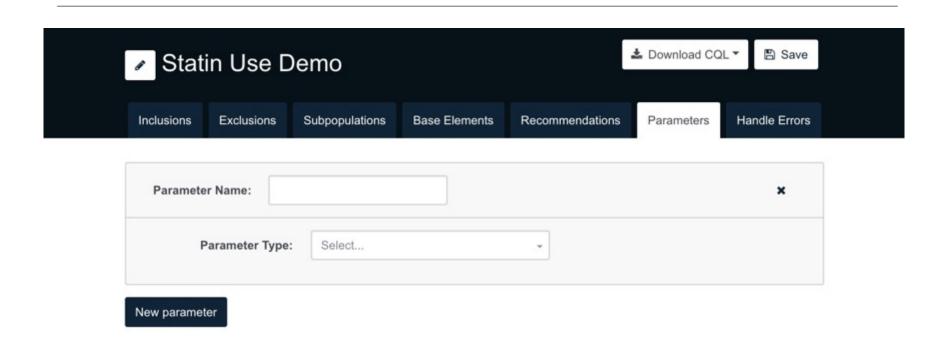






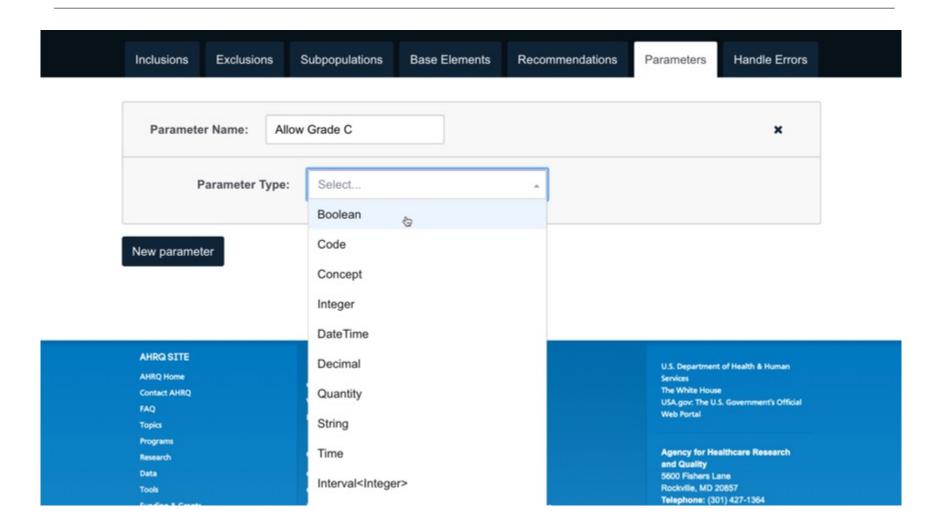




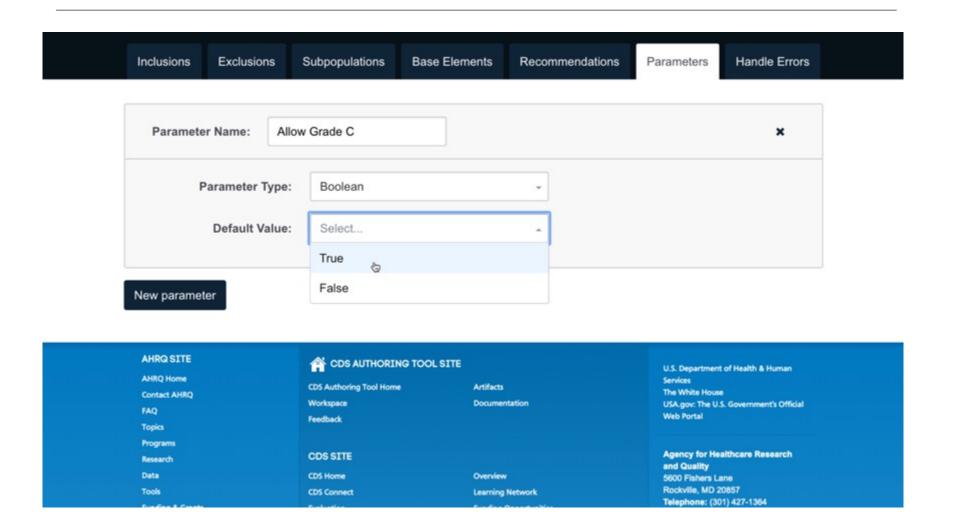


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Programs			





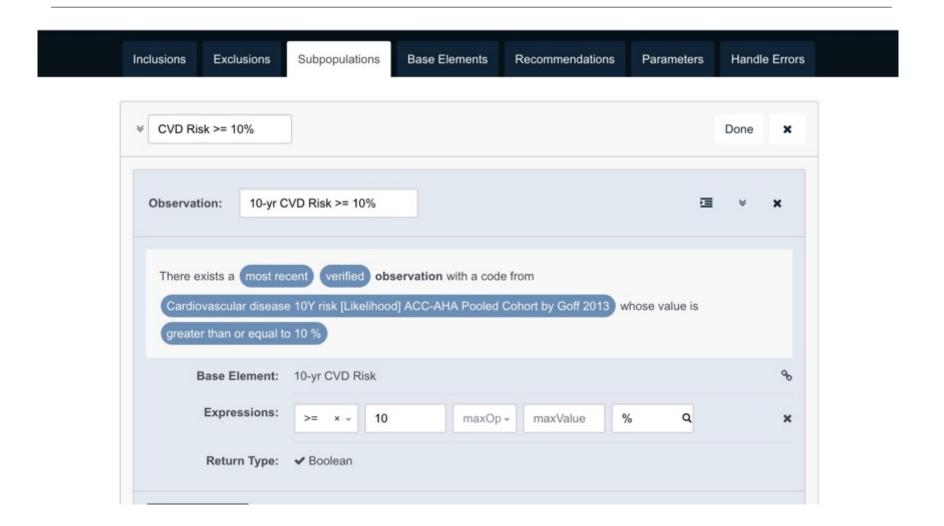




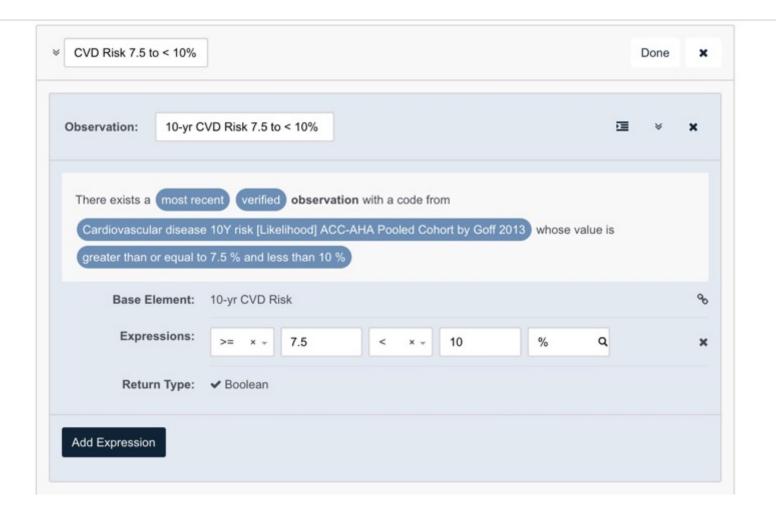


	Exclusions	Subpopulations	Base Elements	Recommendations	Parameters	Handle Errors
Paramet	ter Name: Allo	ow Grade C				×
	Parameter Type:	Boolean		*		
	Default Value:	True		X v		
Appropriate Value of the Control	Name of the last o					
New parame	eter	CDS Authorina Tool Money			Services	t of Health & Human
AHRQ SITE	eter	CDS AUTHORIN CDS Authoring Tool Home Workspace Feedback			Services The White House	
AHRQ SITE AHRQ Home Contact AHRQ FAQ	eter	CDS Authoring Tool Home Workspace	Artifacts		Services The White Hous USA.gov: The U. Web Portal	•
AHRQ SITE AHRQ Home Contact AHRQ FAQ Topics Programs	eter	CDS Authoring Tool Home Workspace Feedback	Artifacts Document	ntation	Services The White Hous USA.gov: The U. Web Portal	e 5. Government's Official althcare Research ane

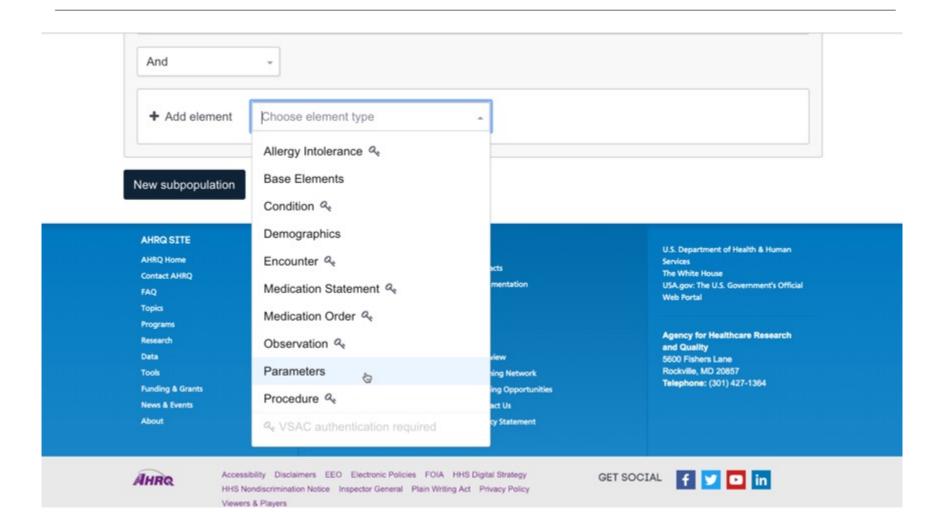




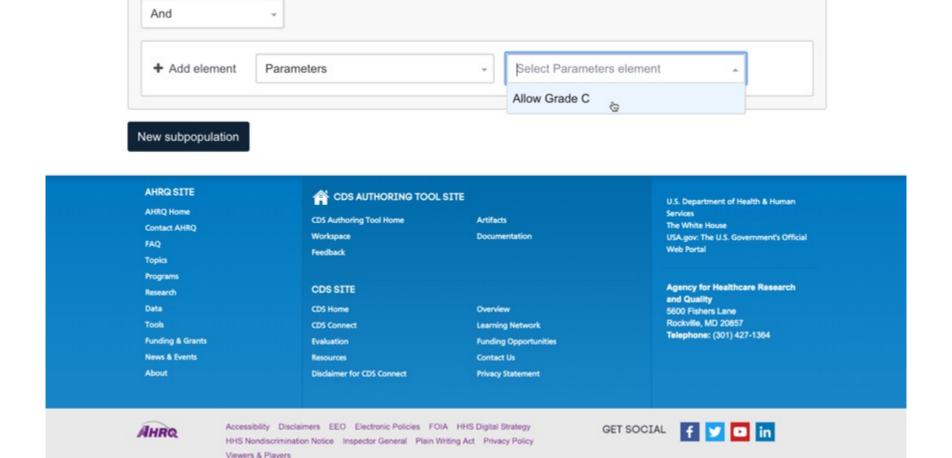












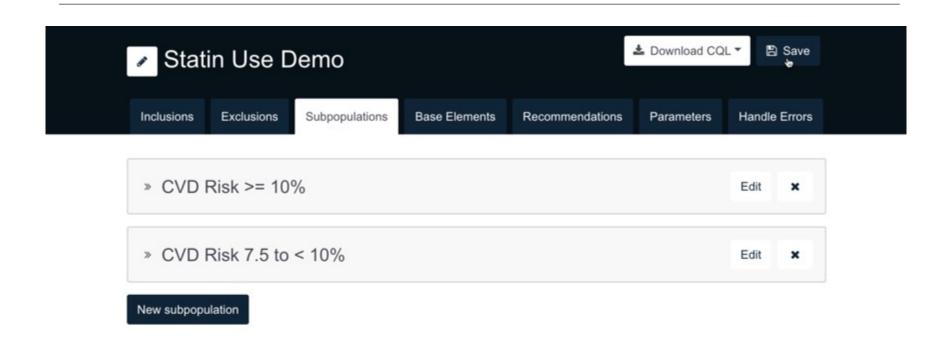


Illow Grade C					☲	¥	×
The value of th	boolean	parameter is m	net				
Retur	Type: 🗸	Boolean					
Add Expression	1						
nd	*						
		ement type					

118



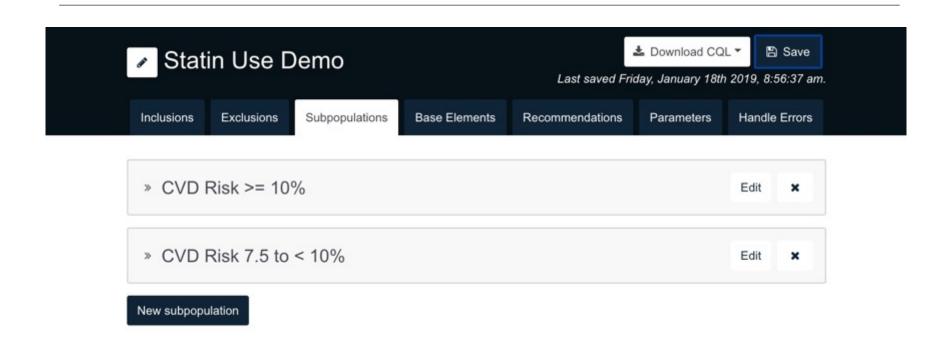
CDS Authoring Tool: Save





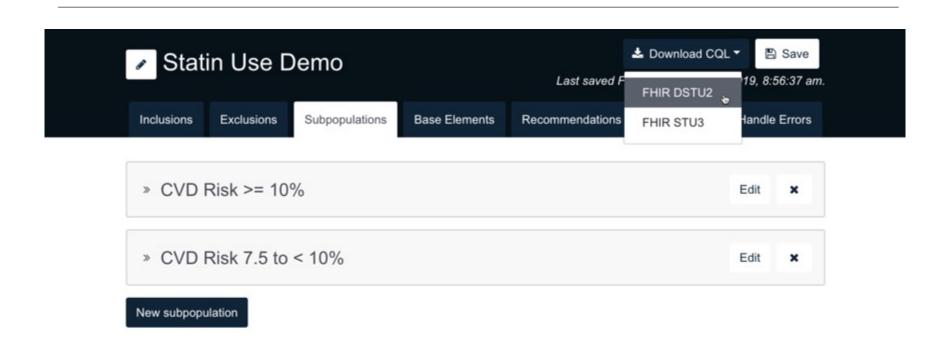


CDS Authoring Tool: Save



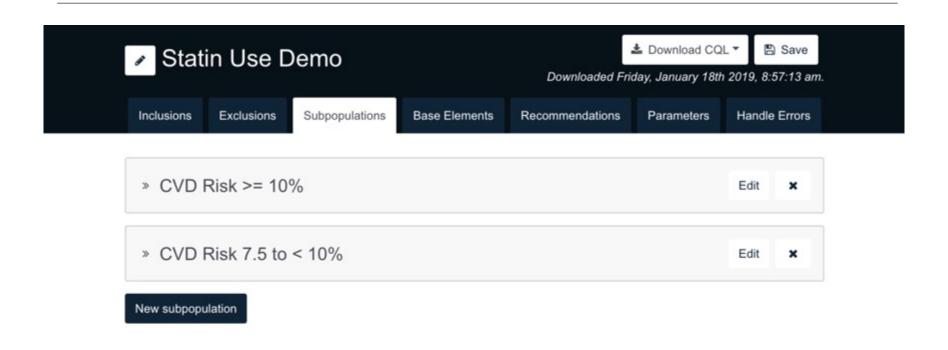






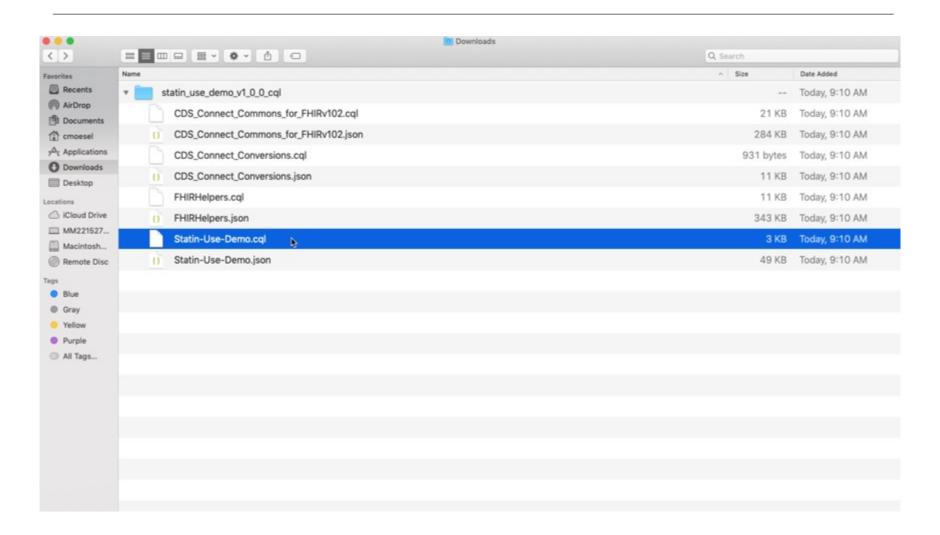




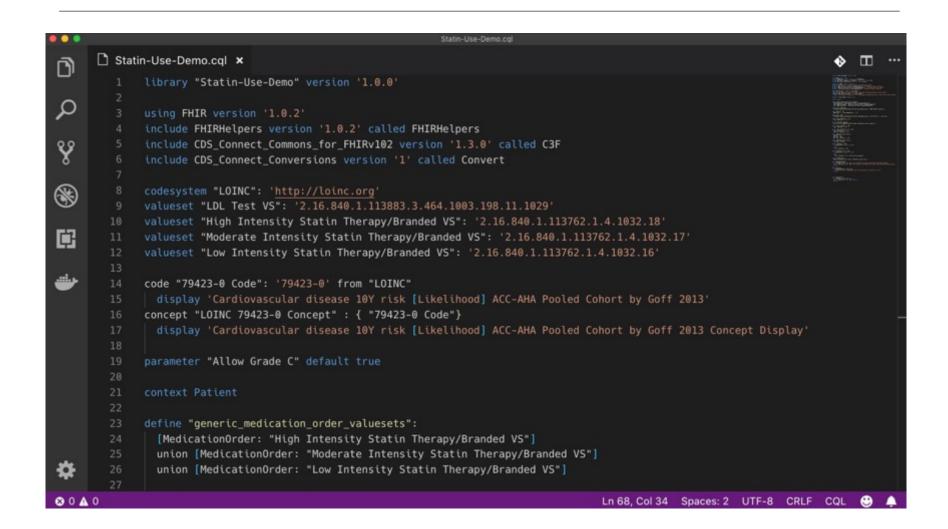














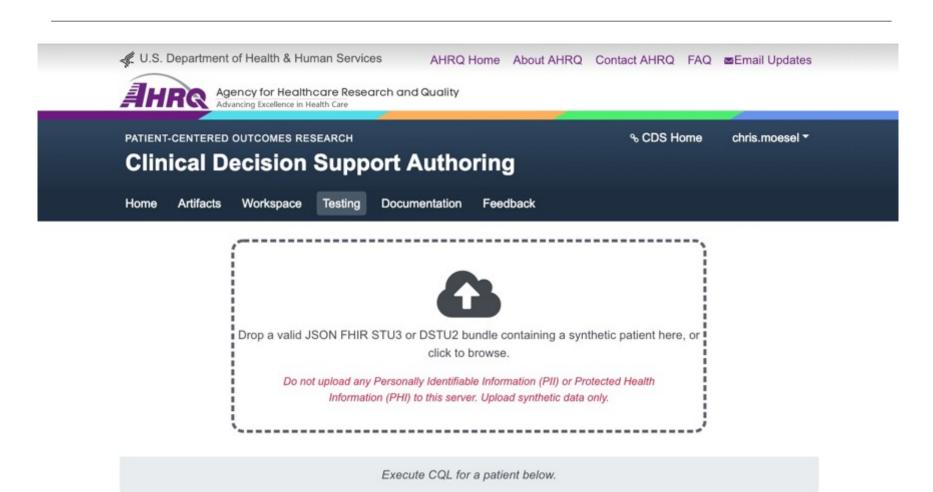
```
☐ Statin-Use-Demo.cgl ×

              define "10-yr CVD Risk":
                C3F.QuantityValue(C3F.MostRecent(C3F.Verified([Observation: "LOINC 79423-0 Concept"]))))
Q
              define "Age 40 - 75":
Y
                AgeInYears() >= 40 and AgeInYears() <= 75
              define "LDL > 130":
➂
                C3F.QuantityValue(C3F.MostRecent(C3F.Verified([Observation: "LDL Test VS"]))) > 130 'mg/dL'
              define "10-yr CVD Risk >= 7.5%":
中
                "10-yr CVD Risk" >= 7.5 '%'
              define "On Statin Therapy":
               exists(C3F.ActiveMedicationOrder("generic_medication_order_valuesets"))
              define "10-yr CVD Risk >= 10%":
                "10-yr CVD Risk" >= 10 '%'
              define "10-yr CVD Risk 7.5 to < 10%":
                "10-yr CVD Risk" >= 7.5 '%'
                and "10-yr CVD Risk" < 10 '%'
              define "MeetsInclusionCriteria":
                "Age 40 - 75"
                and "LDL > 130"
                and "10-yr CVD Risk >= 7.5%"
                                                                                       Ln 68, Col 34 Spaces: 2 UTF-8 CRLF CQL 😃 🔔
```

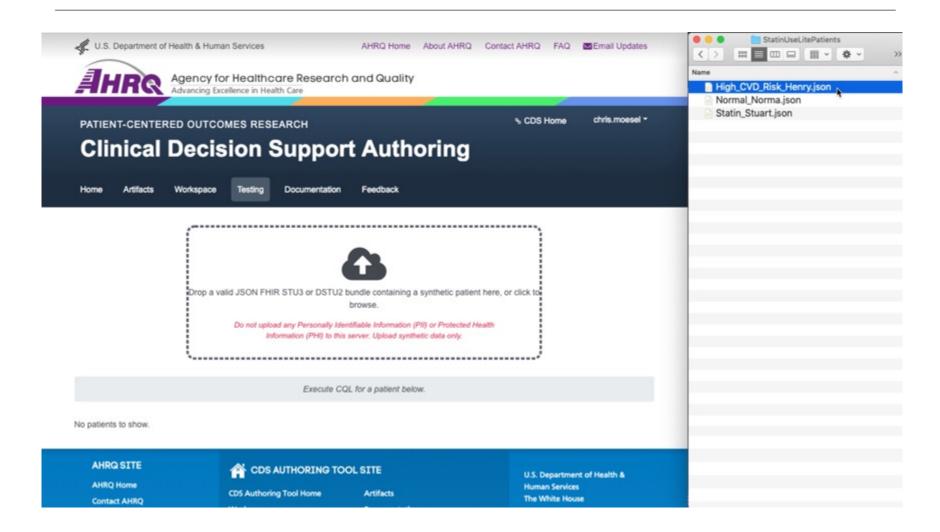


```
☐ Statin-Use-Demo.cql ×
              define "MeetsExclusionCriteria":
                "On Statin Therapy"
Q
              define "CVD Risk >= 10%":
               if "InPopulation" is not true then
❈
                  "10-yr CVD Risk >= 10%"
              define "CVD Risk 7.5 to < 10%":
中
               if "InPopulation" is not true then
                  "10-yr CVD Risk 7.5 to < 10%" and "Allow Grade C"
              define "InPopulation":
                "MeetsInclusionCriteria" and not "MeetsExclusionCriteria"
              define "Recommendation":
               if "CVD Risk >= 10%" then 'Start low to moderate intensity lipid lowering therapy (Grade B)'
               else if "CVD Risk 7.5 to < 10%" then 'Discuss low to moderate intensity lipid lowering therapy (Grade C)'
               else null
              define "Errors":
               if "MeetsExclusionCriteria" then
               {'Recommendation not provided since patient meets exclusion criteria'}
                                                                                        Ln 49, Col 1 Spaces: 2 UTF-8 CRLF CQL 😃 🔔
```

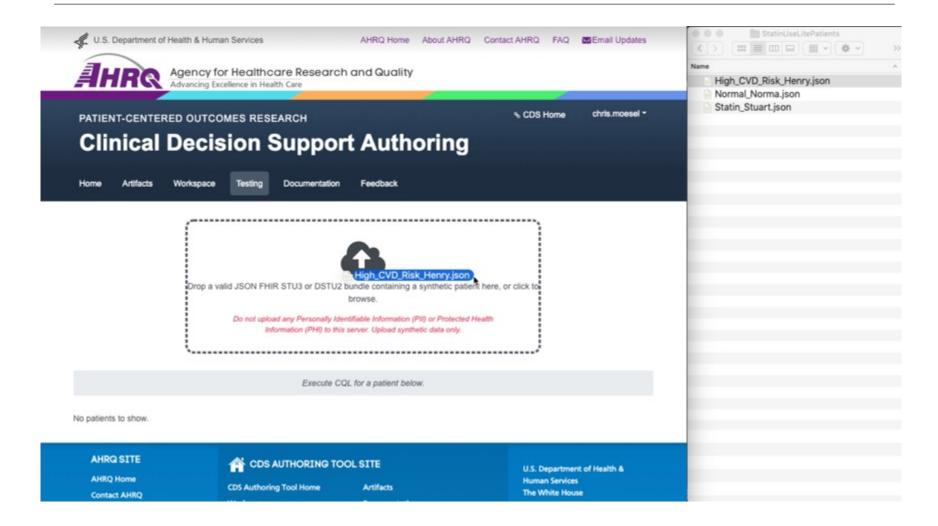




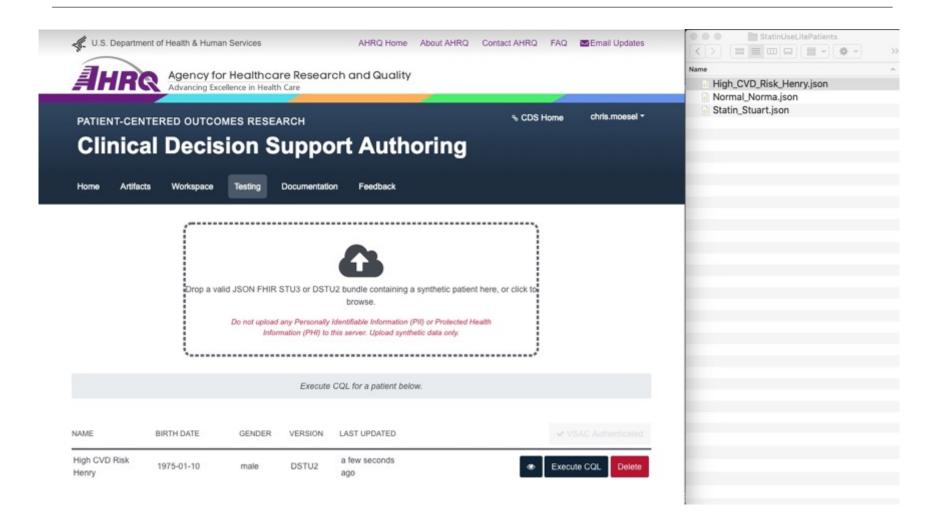




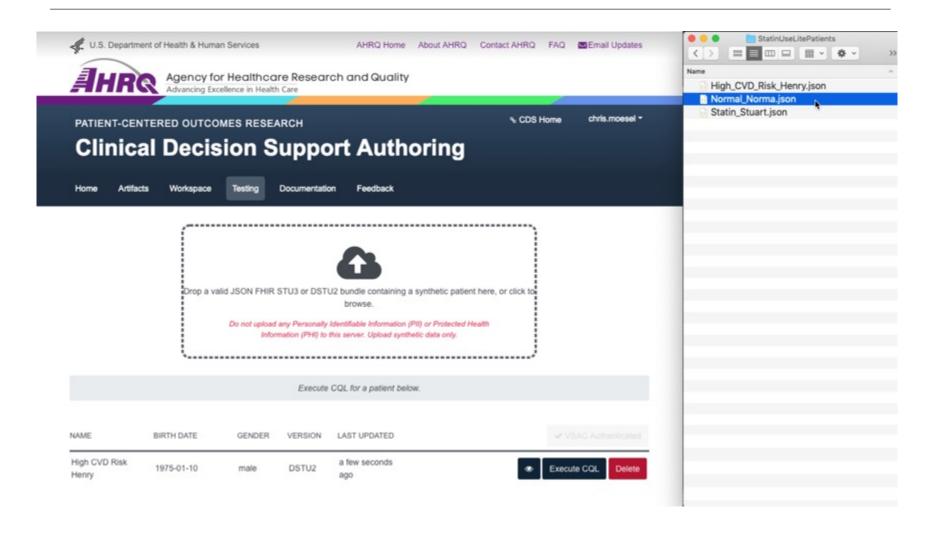




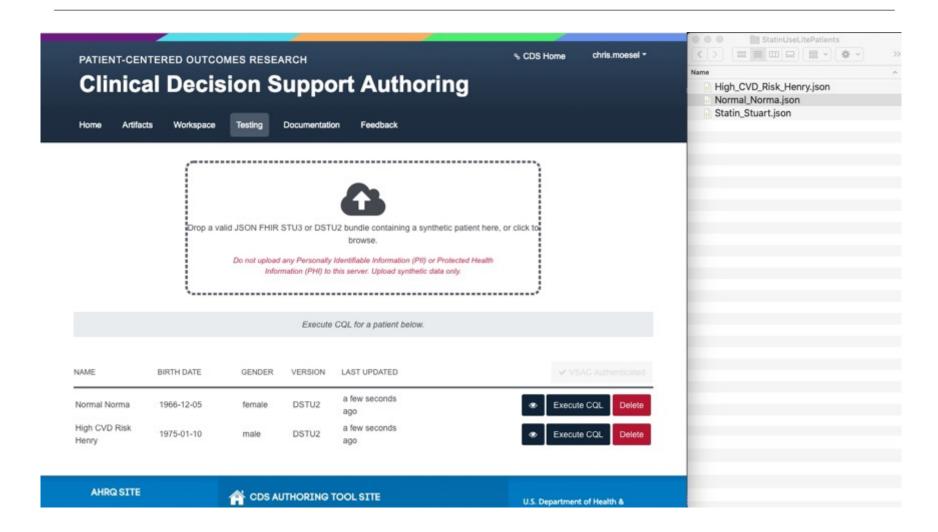




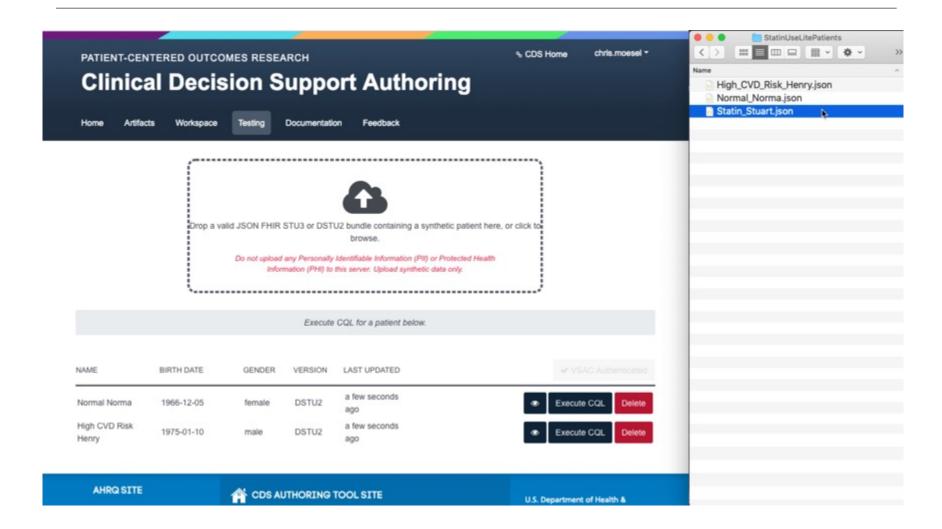




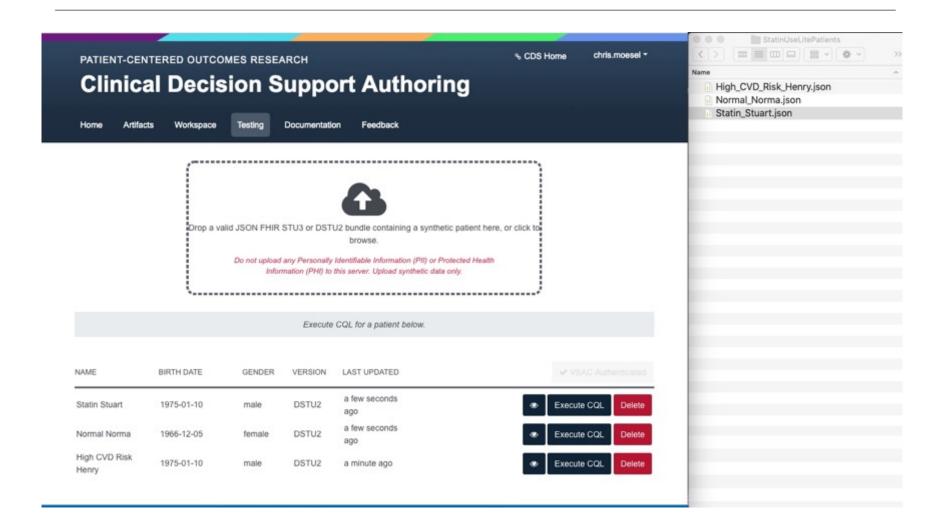
















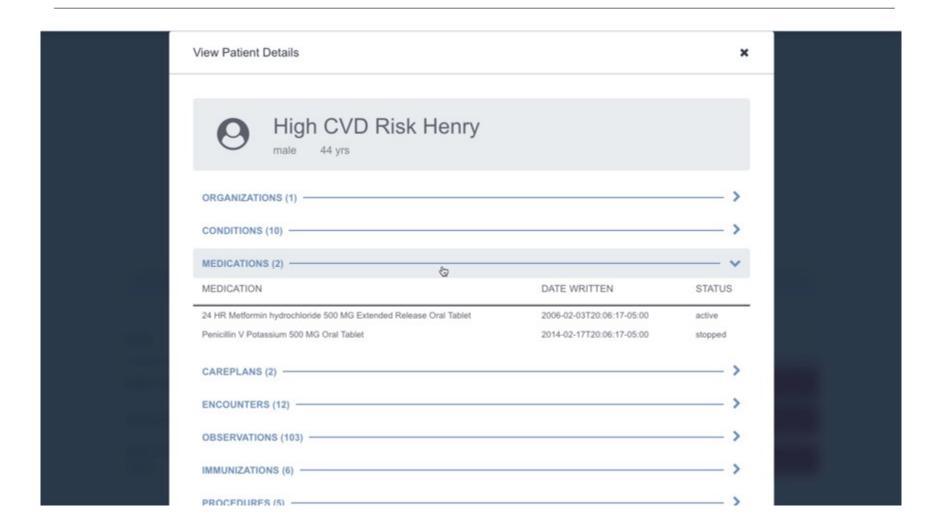
Drop a valid JSON FHIR STU3 or DSTU2 bundle containing a synthetic patient here, or click to browse.

Do not upload any Personally Identifiable Information (PII) or Protected Health Information (PHI) to this server. Upload synthetic data only.

Execute CQL for a patient below.

NAME	BIRTH DATE	GENDER	VERSION	LAST UPDATED	✓ VSAC Authenticated
Statin Stuart	1975-01-10	male	DSTU2	a few seconds ago	Execute CQL Delete
Normal Norma	1966-12-05	female	DSTU2	a few seconds ago	Execute CQL Delete
High CVD Risk Henry	1975-01-10	male	DSTU2	a minute ago	Execute CQL Delete







OBSERVATION	NS (103)	6				~
CATEGORY	TYPE		VALUE	EFFECTIVE	ISSUED	
vital-signs	Body Height		178.37037857387472 cm	2009-02- 06T20:06:17- 05:00	2009-02- 06T20:06:17.0 05:00	673-
vital-signs	Body Weight		101.64361321253863 kg	2009-02- 06T20:06:17- 05:00	2009-02- 06T20:06:17.0 05:00	673-
vital-signs	Body Mass Index		31.9473343355157 kg/m2	2009-02- 06T20:06:17- 05:00	2009-02- 06T20:06:17.0 05:00	673-
vital-signs	Blood Pressure			2009-02- 06T20:06:17- 05:00	2009-02- 06T20:06:17.0 05:00	673-
laboratory	Glucose		146.25757095084364 mg/dL	2009-02- 06T20:06:17- 05:00	2009-02- 06T20:06:17.0 05:00	673-
laboratory	Urea Nitrogen		9.36989014400799 mg/dL	2009-02- 06T20:06:17- 05:00	2009-02- 06T20:06:17.0 05:00	673-
laboratory	Creatinine		1.4964198611845965 mg/dL	2009-02- 06T20:06:17- 05:00	2009-02- 06T20:06:17.0 05:00	673-
laboratory	Calcium		9.758209143838293 mg/dL	2009-02- 06T20:06:17- 05:00	2009-02- 06T20:06:17.0 05:00	673-
laboratory	Sodium		143.64113264981836 mmol/L	2009-02- 06T20:06:17- 05:00	2009-02- 06T20:06:17.0 05:00	673-
laboratory	Potassium		4 760691391730657	2009-02-	2009-02-	



		mmol/L	09T20:06:17- 05:00	09T20:06:17.673- 05:00
laboratory	Carbon Dioxide	23.414943814025904 mmol/L	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Total Cholesterol	217.18908248696656 mg/dL	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Triglycerides	153.3957157685174 mg/dL	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Low Density Lipoprotein Cholesterol	136.44788940072107 mg/dL	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	High Density Lipoprotein Cholesterol	50.06204993254201 mg/dL	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Microalbumin Creatinine Ratio	2.9903271073954496 mg/g	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Estimated Glomerular Filtration Rate	87.73260513711118 mL/min/{1.73_m2}	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
survey	Tobacco smoking status NHIS	Current every day smoker	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
procedure	Cardiovascular disease 10Y risk [Likelihood] ACC-AHA Pooled Cohort by Goff 2013	15.5 %	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Hemoglobin A1c/Hemoglobin.total in Blood	7.596367505946317 %	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00



		mmol/L	09T20:06:17- 05:00	09T20:06:17.673- 05:00
laboratory	Carbon Dioxide	23.414943814025904 mmol/L	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Total Cholesterol	217.18908248696656 mg/dL	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Triglycerides	153.3957157685174 mg/dL	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Low Density Lipoprotein Cholesterol	136.44788940072107 mg/dL	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	High Density Lipoprotein Cholesterol	50.06204993254201 mg/dL	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Microalbumin Creatinine Ratio	2.9903271073954496 mg/g	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Estimated Glomerular Filtration Rate	87.73260513711118 mL/min/{1.73_m2}	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
survey	Tobacco smoking status NHIS	Current every day smoker	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
procedure	Cardiovascular disease 10Y risk [Likelihood] ACC-AHA Pooled Cohort by Goff 2013	15.5 %	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00
laboratory	Hemoglobin A1c/Hemoglobin.total in Blood	7.596367505946317 %	2018-03- 09T20:06:17- 05:00	2018-03- 09T20:06:17.673- 05:00





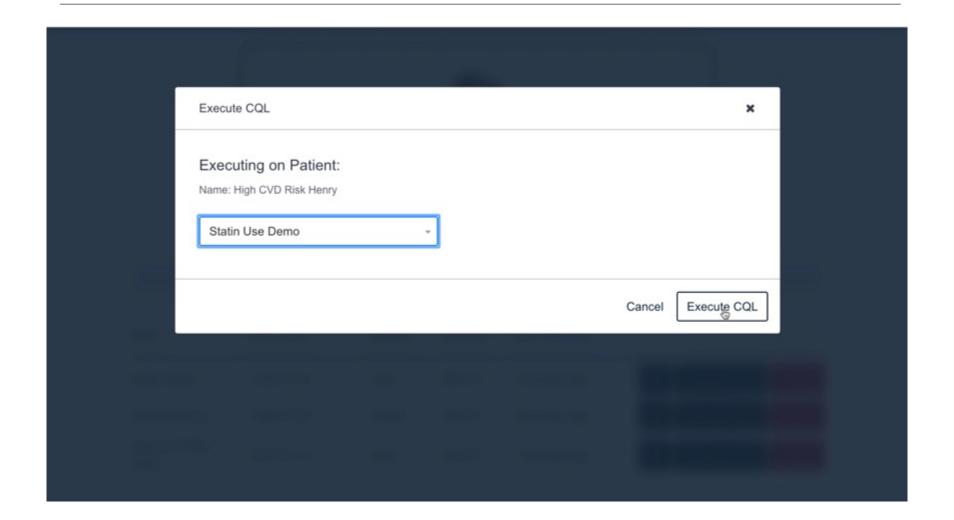
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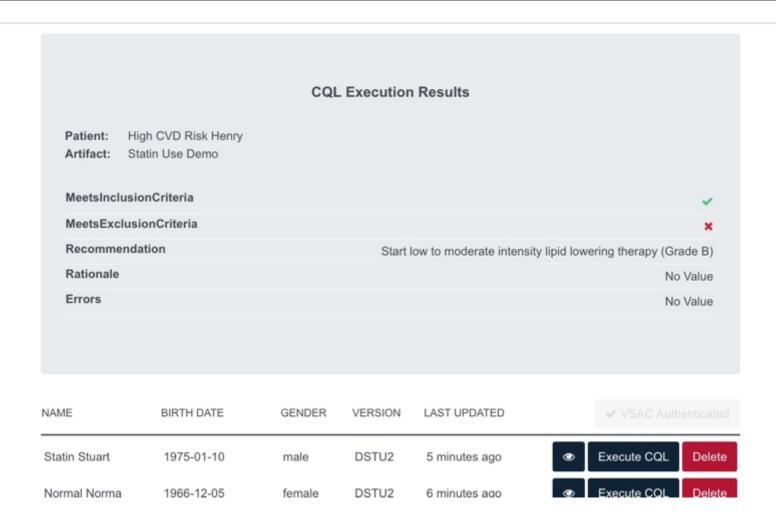
Execute CQL for a patient below.

NAME	BIRTH DATE	GENDER	VERSION	LAST UPDATED		✓ VSAC Auth	enticated
Statin Stuart	1975-01-10	male	DSTU2	5 minutes ago	②	Execute CQL	Delete
Normal Norma	1966-12-05	female	DSTU2	6 minutes ago	•	Execute CQL	Delete
High CVD Risk Henry	1975-01-10	male	DSTU2	6 minutes ago	•	Execute CQL	Delete



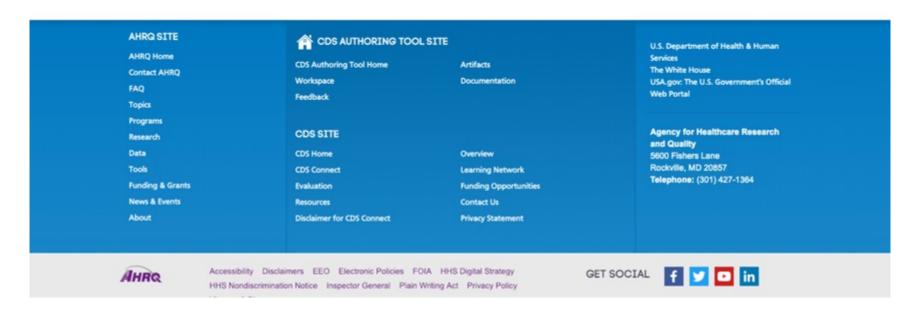




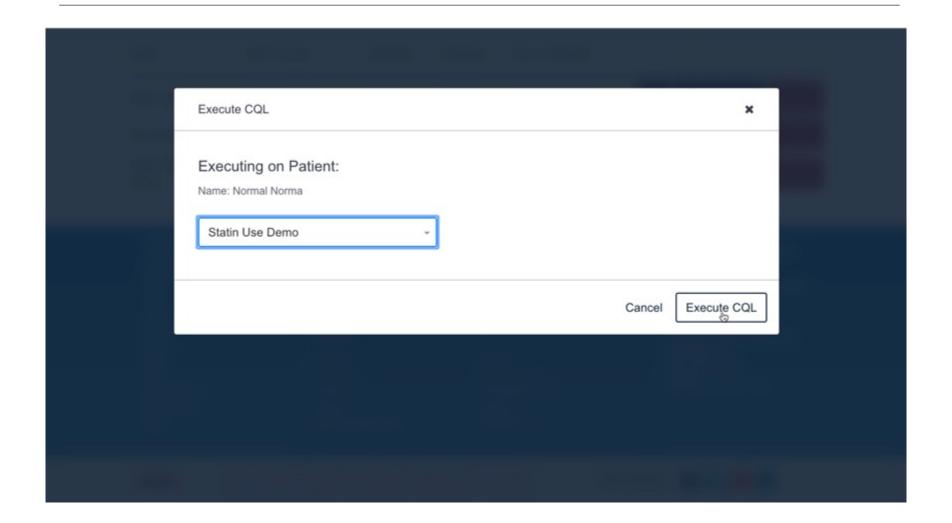




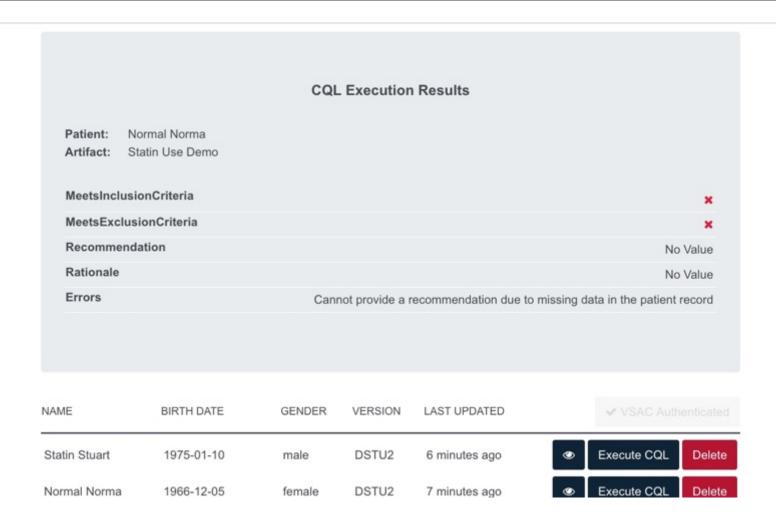
NAME	BIRTH DATE	GENDER	VERSION	LAST UPDATED		✔ VSAC Auth	
Statin Stuart	1975-01-10	male	DSTU2	5 minutes ago	•	Execute CQL	Delete
Normal Norma	1966-12-05	female	DSTU2	6 minutes ago	•	Execute CQL	Delete
High CVD Risk Henry	1975-01-10	male	DSTU2	7 minutes ago	•	Execute CQL	Delete





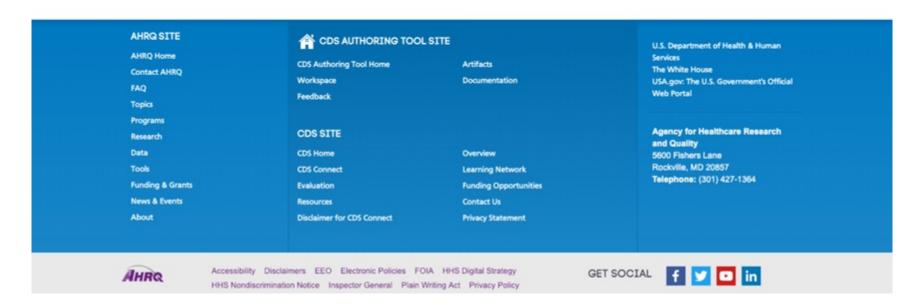




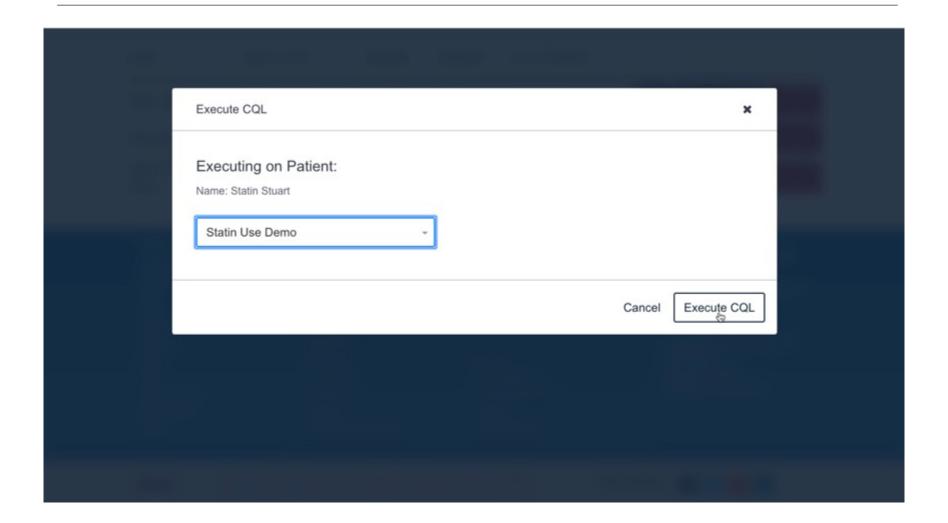




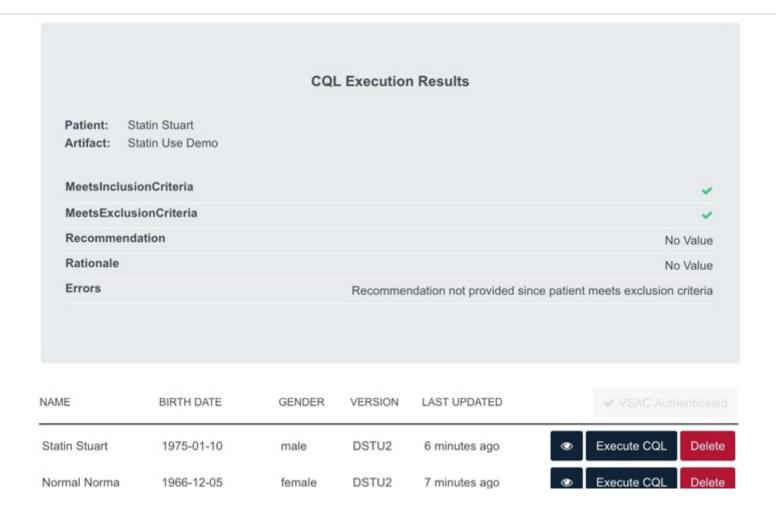
NAME	BIRTH DATE	GENDER	VERSION	LAST UPDATED	✓ VSAC Authenticated
Statin Stuart	1975-01-10	male	DSTU2	6 minutes ago	Execute CQL Delete
Normal Norma	1966-12-05	female	DSTU2	7 minutes ago	Execute CQL Delete
High CVD Risk Henry	1975-01-10	male	DSTU2	8 minutes ago	● Execute CQL Delete









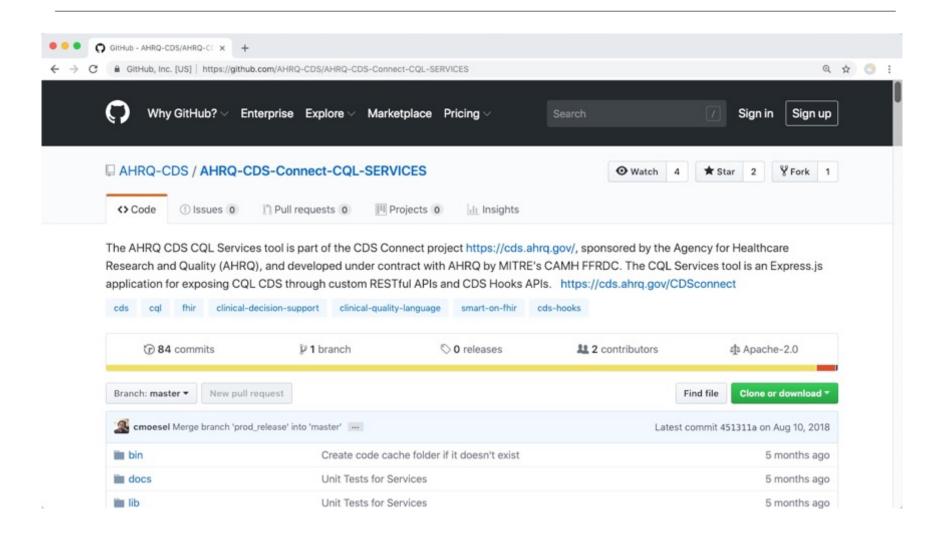




CQL Services

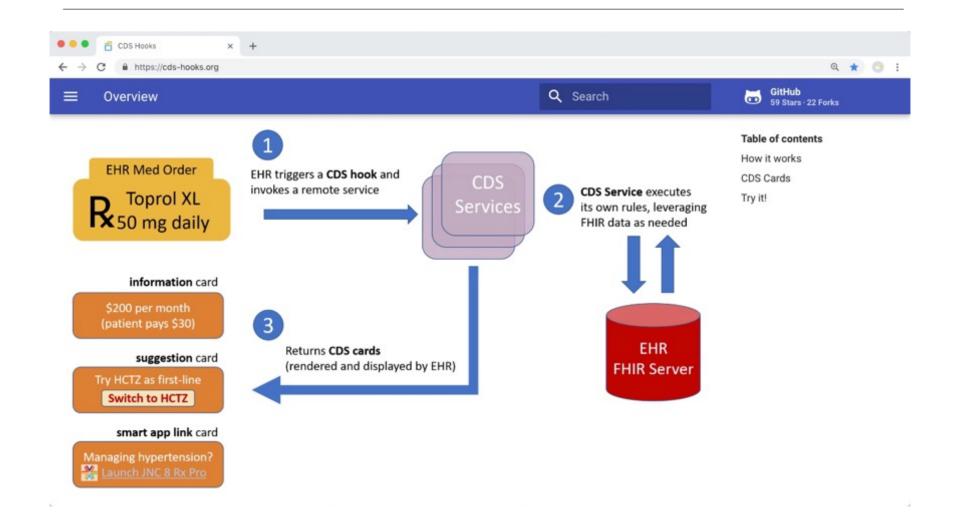


CQL Services

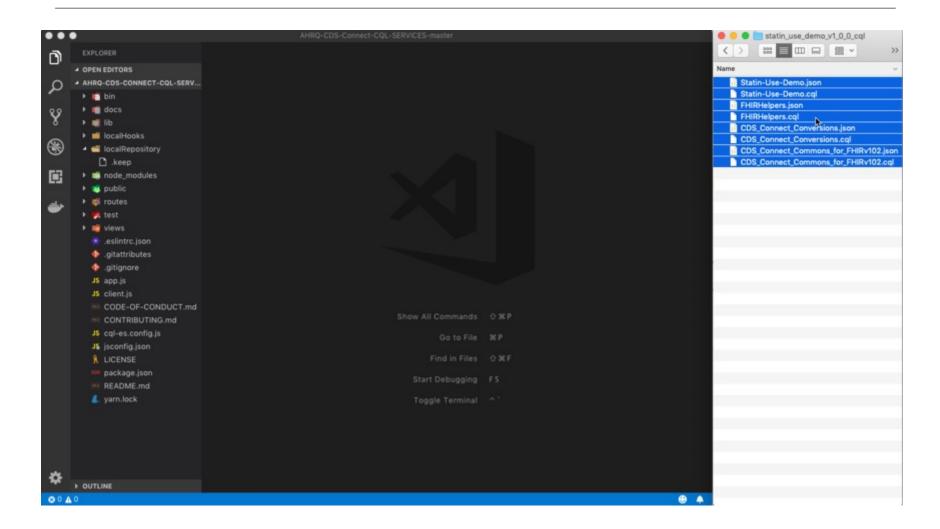




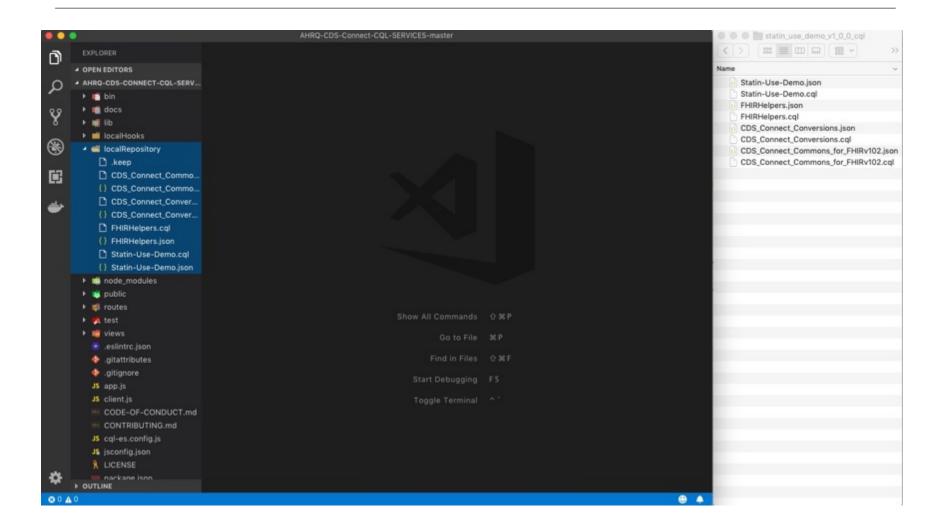
CQL Services: CDS Hooks



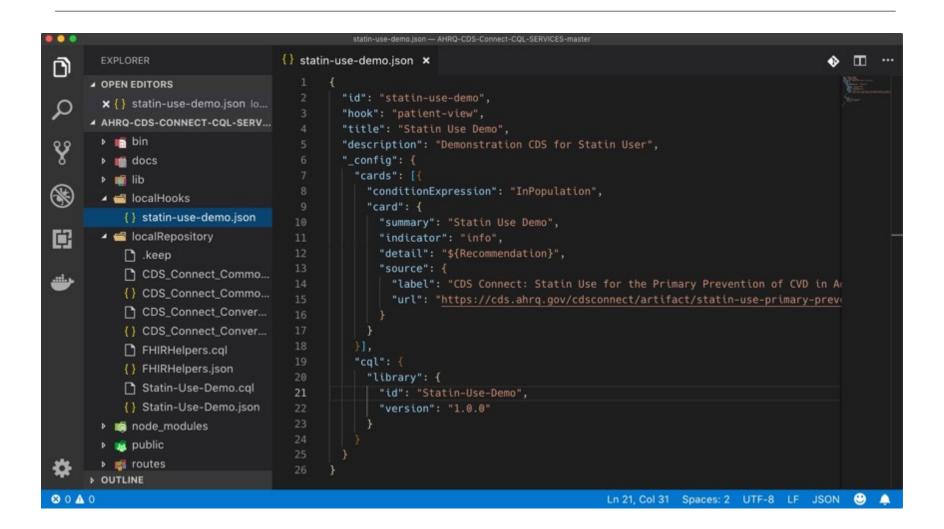




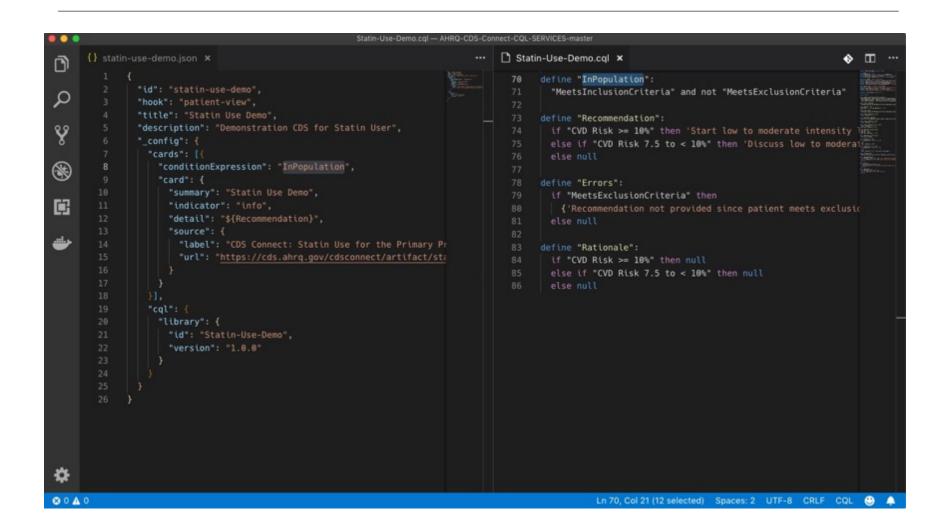




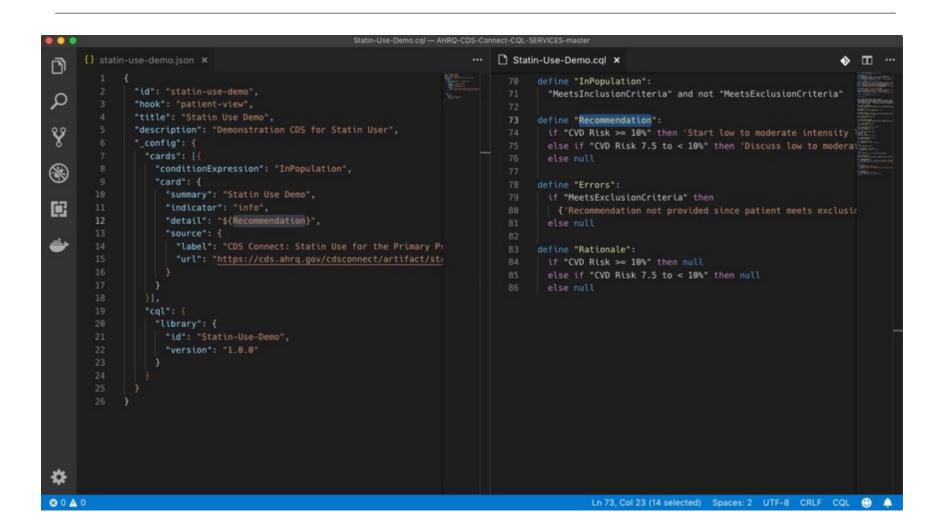










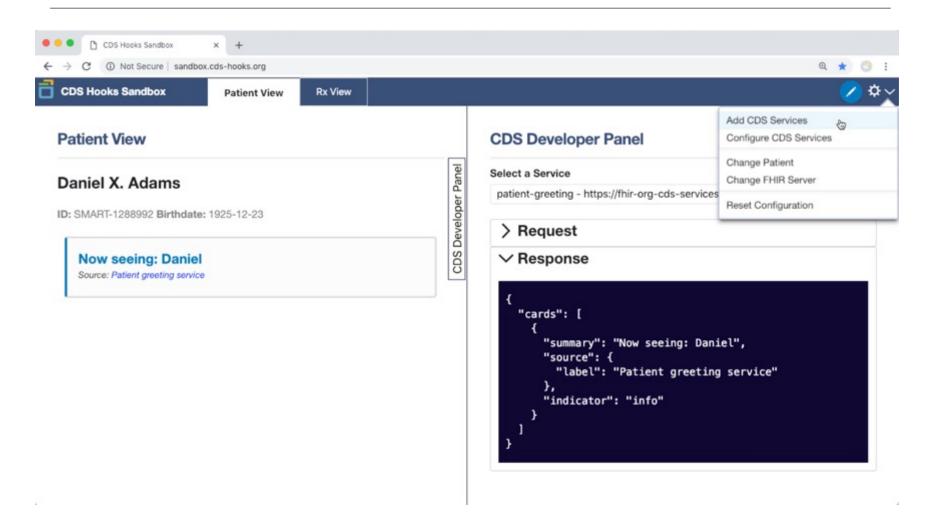




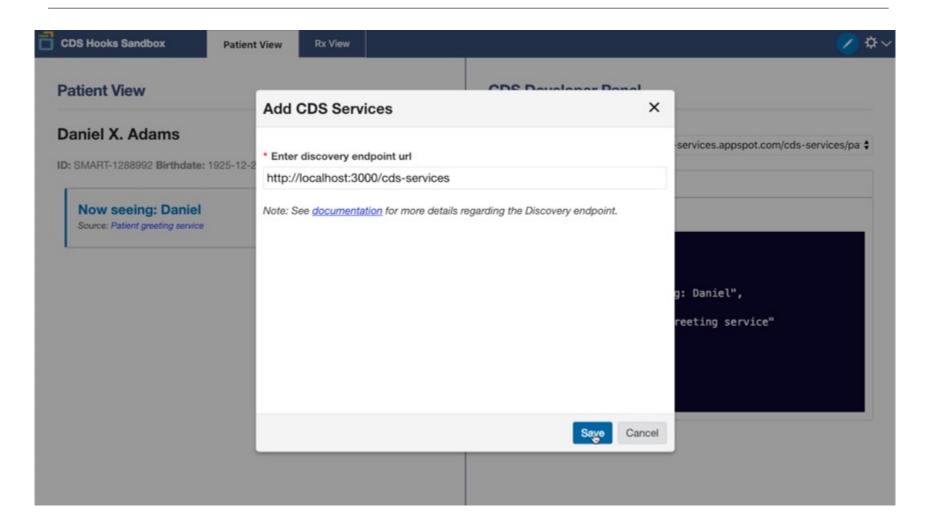
CQL Services: Run

```
AHRQ-CDS-Connect-CQL-SERVICES-master $ yarn start
yarn run v1.12.3
$ node ./bin/www
```

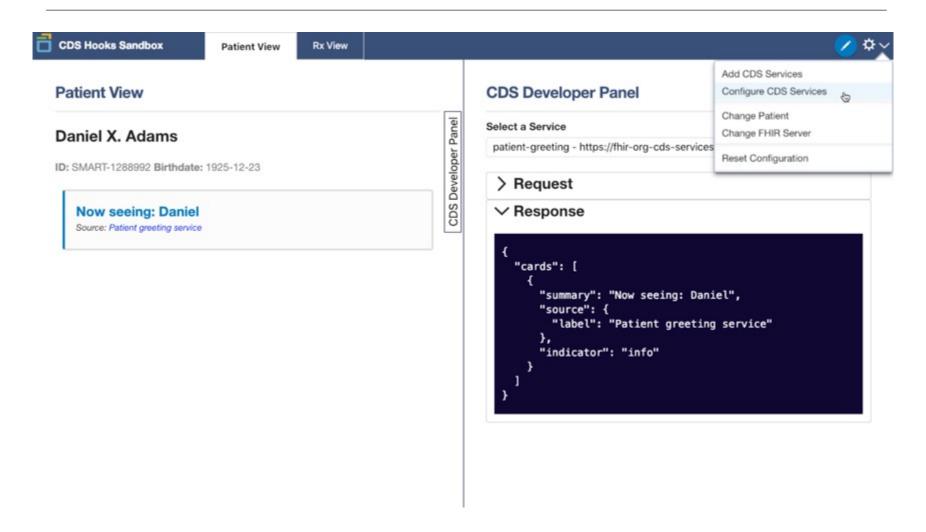








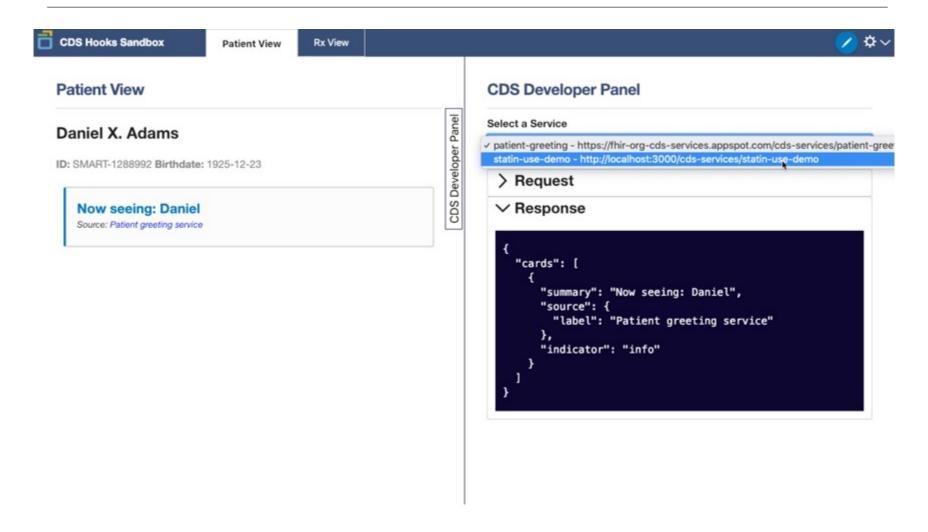




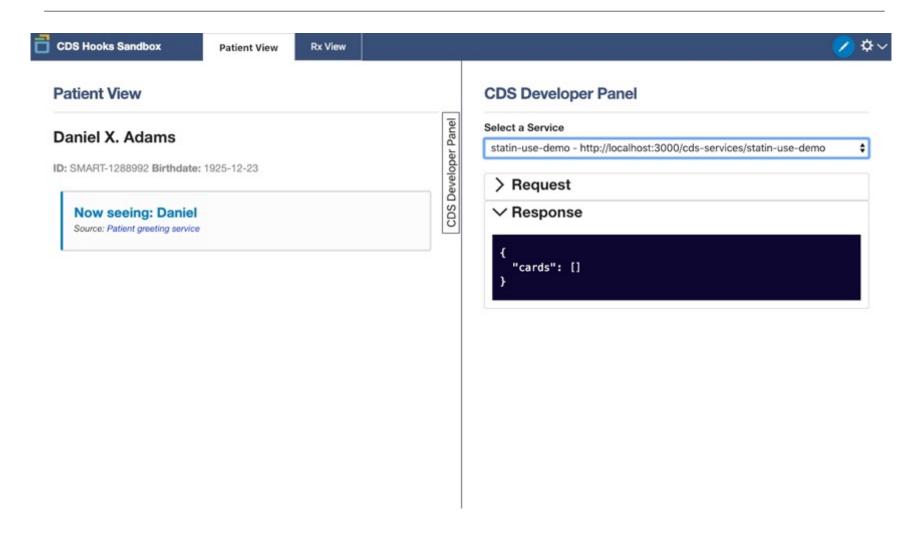




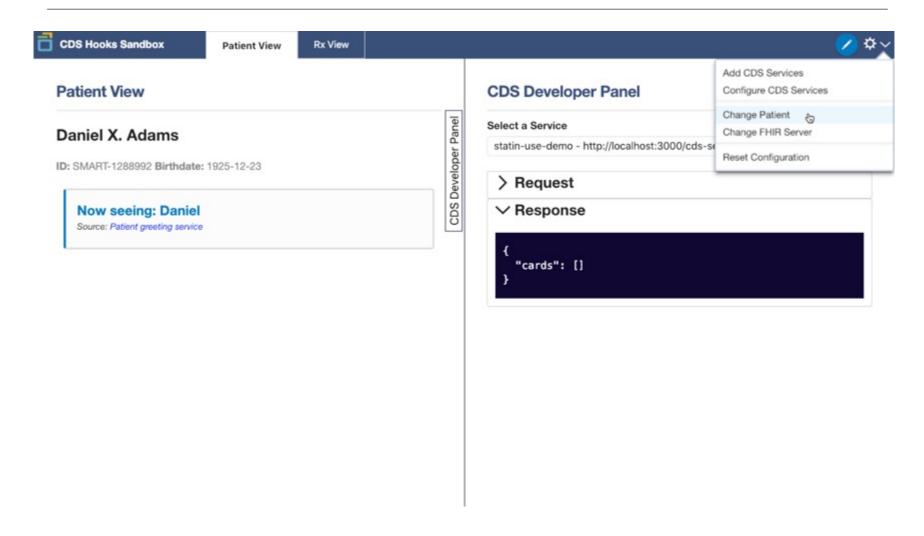




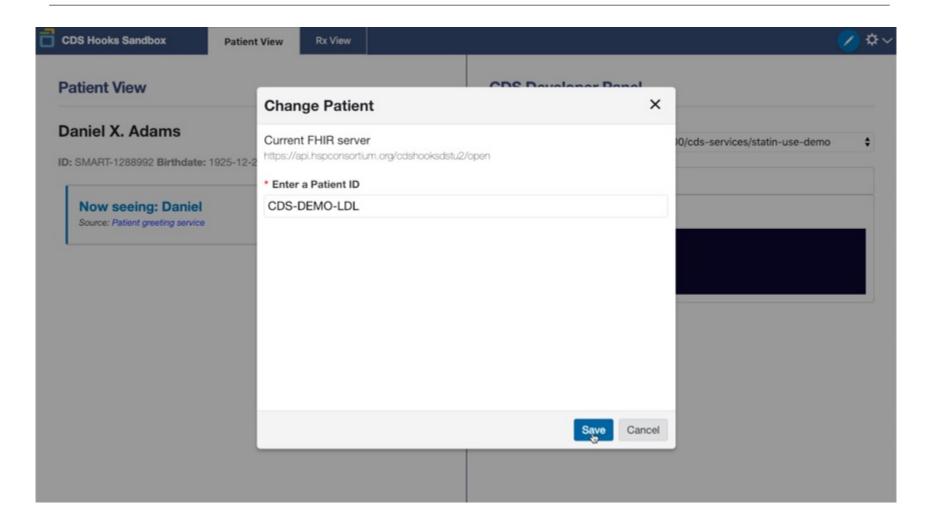




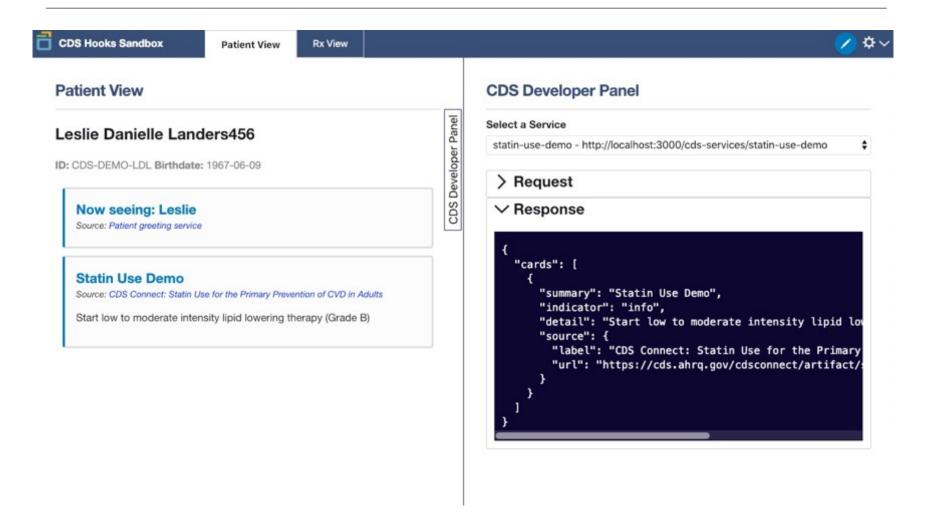














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Questions